STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255130	A. BUILDING _____ B. WING _____	09/15/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TIPPAH COUNTY NURSING HOME	1005 CITY AVENUE NORTH RIPLEY, MS 38663

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS The State Agency (SA) conducted an annual re-certification survey at the facility from 09/12/22 to 09/15/22. During the survey, the SA determined that the facility was not in compliance with the requirements of participation in Medicare and Medicaid and cited F623 related to failure of facility to send written notification of transfers to the resident representative and/or resident. The census upon entrance into the facility was 36 and were licensed for 40 beds.	F 000		
F 623 SS=D	Notice Requirements Before Transfer/Discharge CFR(s): 483.15(c)(3)-(6)(8) §483.15(c)(3) Notice before transfer. Before a facility transfers or discharges a resident, the facility must- (i) Notify the resident and the resident's representative(s) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand. The facility must send a copy of the notice to a representative of the Office of the State Long-Term Care Ombudsman. (ii) Record the reasons for the transfer or discharge in the resident's medical record in accordance with paragraph (c)(2) of this section; and (iii) Include in the notice the items described in paragraph (c)(5) of this section. §483.15(c)(4) Timing of the notice. (i) Except as specified in paragraphs (c)(4)(ii) and (c)(8) of this section, the notice of transfer or discharge required under this section must be made by the facility at least 30 days before the resident is transferred or discharged.	F 623		10/27/22

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 09/30/2022

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F 623	Continued From page 1	F 623		

(ii) Notice must be made as soon as practicable before transfer or discharge when-
(A) The safety of individuals in the facility would be endangered under paragraph (c)(1)(i)(C) of this section;
(B) The health of individuals in the facility would be endangered, under paragraph (c)(1)(i)(D) of this section;
(C) The resident's health improves sufficiently to allow a more immediate transfer or discharge, under paragraph (c)(1)(i)(B) of this section;
(D) An immediate transfer or discharge is required by the resident's urgent medical needs, under paragraph (c)(1)(i)(A) of this section; or
(E) A resident has not resided in the facility for 30 days.

§483.15(c)(5) Contents of the notice. The written notice specified in paragraph (c)(3) of this section must include the following:
(i) The reason for transfer or discharge;
(ii) The effective date of transfer or discharge;
(iii) The location to which the resident is transferred or discharged;
(iv) A statement of the resident's appeal rights, including the name, address (mailing and email), and telephone number of the entity which receives such requests; and information on how to obtain an appeal form and assistance in completing the form and submitting the appeal hearing request;
(v) The name, address (mailing and email) and telephone number of the Office of the State Long-Term Care Ombudsman;
(vi) For nursing facility residents with intellectual and developmental disabilities or related disabilities, the mailing and email address and telephone number of the agency responsible for

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F 623	Continued From page 2 the protection and advocacy of individuals with developmental disabilities established under Part C of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (Pub. L. 106-402, codified at 42 U.S.C. 15001 et seq.); and (vii) For nursing facility residents with a mental disorder or related disabilities, the mailing and email address and telephone number of the agency responsible for the protection and advocacy of individuals with a mental disorder established under the Protection and Advocacy for Mentally Ill Individuals Act. §483.15(c)(6) Changes to the notice. If the information in the notice changes prior to effecting the transfer or discharge, the facility must update the recipients of the notice as soon as practicable once the updated information becomes available. §483.15(c)(8) Notice in advance of facility closure In the case of facility closure, the individual who is the administrator of the facility must provide written notification prior to the impending closure to the State Survey Agency, the Office of the State Long-Term Care Ombudsman, residents of the facility, and the resident representatives, as well as the plan for the transfer and adequate relocation of the residents, as required at § 483.70(l). This REQUIREMENT is not met as evidenced by: Based on record review and staff interview the facility failed to notify the resident and/or resident's representative in writing of the reason for the transfer/discharge to the hospital for three (3) of four (4) residents reviewed. Resident #8, Resident #22, and Resident #39	F 623	1 Resident #8, #22, and #33 resident representatives were notified in writing on 10/3/2022. Ombudsman was notified of #8 transfer on 7/10/22 and #22 transfer on 8/10/22.	

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F 623	Continued From page 3 Findings include: Resident #8: Record review of a typed letter on facility letterhead, dated 9/15/22 and signed by the Administrator revealed, "To Whom It May Concern: This facility has looked and we cannot find a policy on notifying family members in writing when a resident is transferred from this facility. This facility notifies family members by telephone anytime a resident is sent to Emergency Room or to any other facility and this is documented in the medical record. This facility will immediately get a policy to notify family members in writing anytime a resident in transferred from this facility." Record review of the Departmental Notes dated 06/21/22 revealed Resident #8 was congested and had a cough, wheezing and crackles auscultated and his oxygen levels at 90% on 3 liters of oxygen when checked and was sent to the Emergency Room (ER) to be assessed. Record review of the Physician's Orders revealed order dated 6/21/22 to send to the Emergency Room to be assessed. The Resident Representative (RR) was notified by phone of transfer to the hospital. Record review of "Emergency Transfer Log for the Office of the State Long-Term Care Ombudsman" revealed resident transferred to hospital on 6/21/22 and returned on 6/24/22 and Ombudsman was notified. Record review of Face Sheet revealed that Resident #8 was admitted to facility on 12/22/21	F 623	2 All residents have the potential to be affected by this deficient practice. 3 On 9/15/2022, Licensed Social Worker, was verbally educated by Administrator on regulation F623, that a notice for all transfers and discharges must be sent to resident/resident representative in writing. Licensed Social Worker verbalized understanding and updated the current form used for notification on 9/15/2022. On 9/27/2022, a section on Facility Initiated Transfers was added to current Bed Hold policy to ensure that F623 regulation is met. This policy included notifying resident/resident representative in writing of all transfers/discharges. This policy was presented to Medical Staff on 9/27/2022 and was approved and implemented on 9/27/2022. On 9/29/2022, a copy of the F623 regulation and updated policy was given to Licensed Social Worker by Administrator for educational purposes, to ensure that this regulation is met in the future. 4 The Administrator developed a Quality Improvement Monitor on 9/30/2022 to be monitored daily until compliant beginning 9/30/2022, then weekly times 4, then monthly times 1 year. Administrator will monitor each transfer beginning 9/30/2022 to ensure that proper transfer notices are sent in writing to resident/resident representatives on all transfers/discharges by Licensed Social	

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F 623	Continued From page 4 with diagnoses that included, Unspecified Dementia with behavioral disturbance and Chronic Obstructive Pulmonary Disease. Resident #22 Record review of a Departmental Note dated 7/12/22 at 2:58 PM, revealed the resident was difficult to arouse and had difficulty speaking and was sent to the ER for an evaluation. Record review of a Physician Orders revealed an order dated 7/12/22 to send to the ER for evaluation. Record review of Face Sheet revealed Resident #22 was admitted to the facility on 6/25/18 with diagnoses which included Type 2 Diabetes Mellitus and Dementia. Resident #39 Record review of the Departmental Notes dated 8/6/22 at 3:44 PM, revealed a late entry for 8/5/22 that indicated Resident #39 had diminished breath sounds and complained of shortness of breath and was sent to the ER for evaluation. Record review of a Physician's Order dated 8/5/22, revealed an order to send the resident to the ER for evaluation. Review of Face Sheet revealed the resident was admitted to the facility on 8/2/22 with diagnoses that included Malignant neoplasm of prostate, Hypertension and Dementia. An interview on 9/15/22 at 9:15 AM, with the	F 623	Worker. Administrator added to facility Quality scorecard on 9/30/2022. The Quality Assurance Committee will review the monthly results beginning 10/27/2022 and make recommendations as needed based on those monthly results. This will be reported to Quality Assurance Committee for one year.	

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F 623	Continued From page 5 Administrator confirmed Resident #8 was admitted to the hospital on 6/21/22, Resident #22 was admitted to the hospital on 7/12/22, Resident #33 was admitted to the hospital on 7/31/22 and Resident #39 was admitted to the hospital on 8/5/22. She confirmed the RR's were not notified in writing of the reason for the transfer. The Administrator confirmed she was unaware of this requirement and the facility failed to provide the written notification with the reason for transfer to the resident or the RR. She confirmed the facility had no policy on this requirement.	F 623		