STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255150	A. BUILDING _____ B. WING _____	C 10/12/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BEDFORD CARE CENTER OF MENDENHALL	925 WEST MANGUM AVENUE MENDENHALL, MS 39114

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F 000	INITIAL COMMENTS A COVID-19 Focused Infection Control Survey was conducted by the State Agency (SA) on 10/12/22. The facility was found to be in compliance with infection control regulations and has implemented the Centers for Medicare and Medicaid (CMS) and the Centers for Disease Control and Prevention (CDC) recommended practices to prepare for COVID-19. The SA also conducted a Complaint Investigation (CI) for MS #19449 at the facility on 10/12/22. During the survey, the SA did substantiate the category of the complaint for Quality of Care/Treatment related to adequate grooming and cited F677. The facility had a license 60 with a census of 57.	F 000		
F 677 SS=E	ADL Care Provided for Dependent Residents CFR(s): 483.24(a)(2) §483.24(a)(2) A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene; This REQUIREMENT is not met as evidenced by: Based on interviews, record review, and facility policy review, the facility failed to ensure residents who were dependent on staff for assistance with showering received those services for three (3) of five (5) residents reviewed for Activities of Daily Living (ADL assistance. Residents #1, #2, and #3 Record review of the facility policy titled "Activities of Daily Living (ADLs), Supporting" (undated) revealed "Policy Statement ...Residents who are unable to carry out activities of daily living independently will receive the services necessary	F 677	F-677 Bedford Care Center of Mendenhall, LLC acknowledges receipt of the Statement of Deficiencies and proposes this plan of correction to the extent that the summary of findings is factually correct and in order to maintain compliance with the rules and regulation. 1. In an effort to immediately protect the residents, the identified residents were given or offered showers	11/11/22

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

Electronically Signed | 10/26/2022

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F 677	Continued From page 1 to maintain good nutrition, grooming and personal and oral hygiene ... 2. Appropriate care and services will be provided for residents who are unable to carry out ADLs independently ...including appropriate support and assistance with: a. hygiene (bathing, dressing, grooming and oral care) ....". Record review of the facility procedure titled "Shower/Tub Bath" (undated) revealed, "The purposes of this procedure are to promote cleanliness, provide comfort to the resident and to observe the condition of the resident's skin ... General Guidelines ... 2. Stay with the resident throughout the bath. Never leave the resident unattended in the tub or shower ... The following information should be recorded on the resident's electronic ADL record and/or in the resident's medical record: 1. The date and time the shower/tub bath was performed. 2. The name and title of the individual(s) who assisted the resident with the shower/tub bath ...5. If the resident refused the shower/tub bath, the reason(s) and the intervention taken ...". Resident #1 On 10/12/11 at 11:00 AM, an interview with Resident #1 revealed she was not receiving her showers according to the schedule established for her by the facility. She stated there were times when she would ask her assigned Certified Nurse Aide (CNA) about her shower on her scheduled shower day and be told to wait, but the CNA would not return later to assist her with a shower. She denied receiving a bed bath as substitution for showers on her scheduled shower days. She commented that some of the CNAs did provide her with bed baths prior to dressing, but said she	F 677	immediately. Showers were given to the following residents: > 10-12-2022, Resident 1 was provided with a shower by Certified Nursing Assistant. > 10-12-2022, Resident 2 was provided with a shower by Certified Nursing Assistant. > 10-13-2022, Resident 3 was provided a shower by Certified Nursing Assistant. 2. All Residents had the potential to be effected. 3. On October 12, 2022, two bath aides were named with duties of showering and weighing, each resident on the schedule, as well as changing their linens, on the day shift and one dedicated shower aide for the afternoon shift with the same duties as the day shift. If assistance with showering a particular resident is needed, the resident's assigned aide is to assist. For those residents who requested an early shower or late night shower, the night shift aides will shower the resident that they are assigned and ensure that their linens are changed. The facility placed policies into effect on October 13, 2022 in an effort to ensure that all residents would be provided with proper hygiene	

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F 677	Continued From page 2 preferred to go to the shower room and get into the shower at least twice each week. The resident explained she had told her daughter that she was not getting her shower and she felt confident her daughter had reported this to the facility staff. Record review of the "Admission Record" for Resident #1 revealed she was admitted by the facility on 4/14/21. She had diagnoses including Bilateral Osteoarthritis of Knee, Morbid Obesity, Edema, and Visual Loss. Record review of the Minimum Data Set (MDS) with Assessment Reference Date (ARD) of 9/19/22 revealed Resident #1 had a Brief Interview of Mental Status (BIMS) score of 12 out of 15, which indicates moderate cognitive impairment. Further review of the MDS revealed Resident #1 required one person physical assistance for dressing and personal hygiene and physical help in part of bathing activity with one person ADL support provided. Record review of the Resident #1's Comprehensive Care Plan with a revision date of 3/31/22, revealed Resident #1 has an ADL self-care performance deficit. Record review of the documentation of ADL Care on the software Point Click Care (PCC) "Tasks" for Resident #1 for August 2022 revealed 'Intervention/Tasks' listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 1 staff" was not documented as being done on Wednesday, 8/10/22; Saturday, 8/20/22; Wednesday, 8/24/22 or Wednesday 8/31/22. Record review of the documentation of ADL Care on the software PCC for Resident #1 for September 2022 revealed 'Intervention/Tasks'	F 677	practices. A Shower / bath schedule was produced and implemented on October 13, 2022. Care plans were reviewed and updated to reflect the level of assistance needed with bathing / showering residents. On October 13, 2022, Bath aide's duties were published and all bath aides read and understood the duties. On 10-19-2022, Point Click Care was updated to enable the Certified Nursing Assistant to explain why the service did not occur beyond "activity did not occur". The update allows for a reason that the activity didn't occur, i.e. resident out of the building, resident refused, etc... 4. On 10-17-2022, Sign off forms indicating the resident that was given the service and the aide that gave the shower were produced and are to be turned into the Director of Nursing weekly beginning on 10-19-2022 and will continue for two months (12-19-2022). Floor Nurses were assigned the task to review the charts daily beginning 10-19-2022 and will continue for two months to ensure that the showers/baths are occurring or that legitimate reasons are given for not accomplishing the task.	

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F 677	Continued From page 3 listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 1 staff" was not documented as being done on Saturday, 9/17/22 or Saturday, 9/24/22. Record review of the documentation of ADL Care on the software PCC for Resident #1 for October 2022 revealed 'Intervention/Tasks' listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 1 staff" was not documented as being done on Saturday, 10/01/22. Resident #2 On 10/12/11 at 11:15 AM, an interview with Resident #2 revealed she did not always receive her scheduled showers. She stated "They just don't always do it. Some of them will take you down there for a shower, and some of them don't." She explained she was concerned about body odor and had reported to her nurse when she hadn't received assistance for a shower on her scheduled shower days. Record review of the "Admission Record" for Resident #2 revealed she was admitted by the facility on 10/13/21, with diagnoses including diagnoses History of Transient Ischemic Attack (TIA), Cerebral Infarction, and Polyneuropathy. Record review of the Annual MDS with ARD of 10/09/22, revealed Resident #2 has a BIMS score of 15, indicating no cognitive impairment. Further MDS review revealed she was assessed by the facility as requiring one-person assistance for dressing and personal hygiene and supervision of one person ADL support provided for bathing activities.	F 677	Quality Assurance and Performance Improvement committee meeting will be held on November 8, 2022 and the issue will be discussed. Three additional Quality Assurance and Performance Improvement committee meetings will be held addressing the issue for three months.	

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Record review of the Comprehensive Care Plan with revision date of 10/14/21, revealed Resident #2 had an ADL self-care performance deficit related to limited range of motion (ROM).

Record review of the documentation of ADL Care on the software PCC "Tasks" for Resident #2 for August 2022 revealed 'Intervention/Tasks' listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 2 staff" was not documented as being done on Saturday, 8/20/22, Wednesday, 8/24/22 or Wednesday 8/31/22.

Record review of the documentation of ADL Care on the software PCC for Resident #2 for September 2022 revealed 'Intervention/Tasks' listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 2 staff" was not documented as being done on Saturday, 9/10/22, Saturday, 9/17/22 or Saturday, 9/24/22.

Record review of the documentation of ADL Care on the software PCC for Resident #2 for October 2022 revealed 'Intervention/Tasks' listed as "Bathing Wednesday and Saturday 7-3 Extensive assist x 2 staff" was not documented as being done on Saturday, 10/01/22 or Wednesday 10/05/22.

Resident #3

On 10/12/11 at 11:30 AM, an interview with Resident #3 confirmed she was the facility Resident Council President. Resident #3 stated she did not always get her shower on her scheduled shower days. She stated, "Sometimes it's over a week between showers". The resident explained that she prefers to go to the shower room and get a shower at least twice each week.

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Resident #3 revealed there had been concerns voiced during the Resident Council meetings regarding residents not receiving their showers as scheduled in more than one meeting. She stated that several residents had voiced concerns, but she could not recall all their names. She commented that Administration had told residents that steps were being taken to rectify the problem, but she had not seen any improvement as of this date. She explained that the Activity Director would assist in setting up the Council's monthly meetings. As President of the Resident Council, she stated that she intended to contact the Activity Director in regard to having a Resident Council Meeting today at 2:00 PM. The President invited the SA to attend the meeting.

Record review of the "Admission Record" for Resident #3 revealed an original admission date of 5/21/21, and a current admission date to the facility of 5/14/22. The resident's diagnoses include Hypothyroidism, Obesity, and Age-Related Osteoporosis, and Type 2 Diabetes Mellitus.

Record review of the Resident #3's Quarterly MDS with ARD of 7/25/22, revealed a BIMS score of 15, indicating no cognitive impairment. Review of the Functional Status for Bathing revealed the resident requires supervision with one person assistance for transfer.

Record review of the Comprehensive Care Plan with a revision date of 10/14/21, and a target date of 10/18/22, revealed Resident #3 had an ADL self-care performance deficit related to activity intolerance.

Record review of the documentation of ADL Care

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on the software PCC "Tasks" for Resident #3 for August 2022, revealed 'Intervention/Tasks' listed as "Bathing Monday and Thursday 7-3 Limited assist x 1 staff" was not documented as being done on Monday, 8/08/22 or Thursday 8/11/22.

Record review of the documentation of ADL Care on the software PCC "Tasks" for Resident #3 for September 2022 revealed 'Intervention/Tasks' listed as "Bathing Monday and Thursday 7-3 Limited assist x 1 staff" was not documented as being done on Monday, 9/19/22; Thursday, 9/22/22; Monday, 9/26/22 or Thursday 9/29/22.

Record review of the "BATH SCHEDULE" posted in the shower room revealed Resident #1 and Resident #2 were scheduled to receive a shower/bath on the 7-3 Shift every Wednesday and Saturday; Resident #3 was scheduled to receive a shower/bath on the 7-3 Shift every Tuesday and Friday.

On 10/12/22 at 12:30 PM an interview with the Resident Representative for Resident #1 revealed she was concerned about her sister not receiving scheduled showers at the facility. She stated her sister had reported to her that the facility staff were not taking her to the shower room for showers per her schedule. She stated, "She needs her showers." She explained, she does not believe Resident #1 can maintain proper hygiene with bed baths only and the resident told her she preferred to have a shower at least twice a week.

On 10/12/22 at 2:00 PM observation at the Resident Council Meeting revealed there were twelve residents in attendance. The Resident Council President opened the meeting. The

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Resident Council President asked the Council if anyone had any problems getting showers." Six (6) of the Twelve Resident Council members in attendance reported they were not receiving showers weekly as scheduled.

Review of Resident Council meeting minutes from July 22, 2022, revealed residents stated that some of the CNAs were not giving baths.

Review of Resident Council meeting minutes from August 8, 2022, revealed residents stated they were not getting baths and their beds made.

Review of Resident Council meeting minutes from September 2, 2022, revealed that residents stated CNAs were not giving baths and not changing linens.

Record review of the "Resident Grievance/Complaint Investigation Report Form" dated 4/13/22, revealed Resident #2's family had filed a grievance/complaint regarding bath/shower with the social worker which was signed as reviewed by the former Administrator on 4/14/22.

Record review of the "Resident Grievance/Complaint Investigation Report Form" dated 8/01/22 revealed Resident #3 had filed a grievance/complaint regarding bath/shower with the social worker which was signed as reviewed by the Administrator on 8/05/22.

On 10/12/22 at 2:30 PM, during an interview with CNA #1, she confirmed the "BATH SCHEDULE" was supposed to be used to inform the CNAs which residents they were responsible for taking to the shower room for a shower/bath each day on the "7-3 Shift" on the "3-11 Shift". She

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confirmed she has heard residents complaining that they had not received assistance to go to the shower room on their scheduled shower/bath days.

On 10/12/22 at 2:45 PM, an interview with Registered Nurse (RN) #1 revealed the CNAs were responsible for checking the "BATH SCHEDULE" and taking scheduled residents to the shower room and provision of assistance for shower/bath. She stated the nurses were responsible to make sure ADL activities were provided for each resident. She confirmed that if there was any reason a CNA could not provide assistance for bath/shower for a resident on their scheduled shower day the CNA was supposed to report to the nurse and document in PCC software on the kiosk.

On 10/12/22 at 4:10 PM, in an interview with CNA #2, she explained that there's a list posted on the wall in the shower room and in the "CNA Assignment Book" that tells the CNA which residents are supposed to get a shower each day. She stated all residents receive assistance with showers, so someone must be with them in the shower room. CNA #2 confirmed each CNA is responsible for checking the "BATH SCHEDULE" and providing assistance to their assigned residents on the list. If resident's refuse or there was a reason the scheduled shower/bath could not be given, CNA #2 said she would notify the nurse.

On 10/12/22 at 4:25 PM, an interview with Licensed Practical Nurse (LPN) #1 revealed that all residents were accompanied by at least one CNA to the shower room for a shower/bath. She stated the nurses and CNAs had the "Kardex"

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and the resident "Profile on PCC for ADL needs" to use to determine the level of assistance needed for ADLs, including bathing activities and how much the resident was able to participate in ADLs. She confirmed assistance with ADLs were to be provided according to the resident's preferences as much as possible. She stated if a scheduled shower was not accomplished for a resident, the CNA was responsible for notification of the nurse.

On 10/12/22 at 4:37 PM, an interview with the Social Worker revealed she had received complaints from residents that they were not receiving their scheduled showers every week. She stated she had made the DON and the Administrator aware of the complaints.

On 10/12/22 at 4:45 PM, an interview with the Activity Director revealed she confirmed she helped the facility Resident Council hold meetings every month and takes meeting minutes. She confirmed the Council had brought up concerns about residents not receiving shower/baths as scheduled or according to their preferences during meetings and she had made the DON and Administrator aware of the concerns voiced at the Resident Council Meetings.

On 10/12/22 at 4:50 PM during an interview, the Director of Nurses (DON) confirmed that the nurses were responsible for supervising the CNAs to ensure that each resident received their scheduled bath/shower twice each week and as desired according to the residents' preferences. She confirmed that she had been made aware that there were residents who had complained that they were not provided with their scheduled bath/shower according to their shower schedule

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F 677	Continued From page 10 or preference. She stated that the staff was "working on the problem" but acknowledged "it's obviously still a problem". On 10/12/22 at 5:00 PM during an interview, the Administrator confirmed that he had been made aware that there were residents who had complained that they were not provided with their scheduled bath/shower according to their shower schedule or preference. He stated that in response to multiple resident complaints, the facility had decided to institute a plan which included having two (2) shower aides, but the practice had not been started yet and residents were still reporting that they had not received their scheduled bath/shower.	F 677		