STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255321	A. BUILDING _____ B. WING _____	10/13/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HATTIESBURG HEALTH & REHAB CENTER	514 BAY STREET HATTIESBURG, MS 39401

(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 survey at the facility from 10/10/22 through 10/13/22. During the survey, the SA determined the facility was not in compliance with the Medicare and Medicaid Requirements for Participation and cited F623 and F625. The facility was licensed for 184 beds and had a census of 143 at the time of survey.	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. (ii) Notice must be made as soon as practicable before transfer or discharge when-	F 623		11/25/22

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

Electronically Signed | 10/28/2022

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F 623	Continued From page 1	F 623		

(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 the protection and advocacy of individuals with developmental disabilities established under Part

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F 623	Continued From page 2 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 interviews, record review and facility policy review the facility failed to provide written documentation when residents were transferred to the hospital for two (2) of four (4) residents reviewed for hospitalizations. Resident #72 and Resident #117. Findings Included:	F 623	1) On 10/13/2022 Resident #72 and Resident #117 were reviewed for transfer/discharge notification by Social Services Director and revealed the facility failed to keep a copy of mailed notification as required. Resident #72 and Resident #117 were mailed another copy of the transfer/discharge notification on 10/26/22 by Social Services Director.	

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F 623	Continued From page 3 Record review of the facility's policy, titled "Bed-Holds and Returns, dated March 2017 revealed " ...Policy Interpretation and Implementation ...3. Prior to a transfer, if possible, written information will be given to the residents and the resident representatives that explains in detail ...d. The details of the transfer (per the Notice of Transfer) ..." Resident #72 Record review of the "Face Sheet" revealed the facility admitted Resident #72 on 5/6/22 and she had diagnoses of Chronic Diastolic Congestive Heart Failure and Chronic Kidney Disease, Stage IV. Record review of the Discharge Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 8/23/22 revealed Resident #72 was discharged to an acute hospital. Record review of the "Departmental Notes" revealed a "Nurses Note" dated 8/23/22 at 5:20 PM, which noted Resident #72 was transferred to the local hospital and the family was notified by phone. Record review of the Discharge MDS with an ARD of 9/23/22 revealed Resident #72 was discharged to an acute hospital. Record review of the "Departmental Notes" revealed a "Nurses Note" dated 9/23/22 at 3:44 PM, which noted Resident #72 was transferred to a behavioral unit and the family was notified by phone. Record review of the Quarterly Minimum Data Set	F 623	2) All 143 residents could be affected by this deficient practice. 3) On 10/25/22, an in-service was conducted by Administrator with Social Services Director as well as Business Office Director in regards to providing written documentation when residents were transferred. On 10/27/22 the Quality Assurance Committee reviewed the policy on "Transfer Notification" and no changes were recommended at this time. 4) The facility Social Services Director will monitor effective 10/28/22 and review all discharges daily for 4 weeks and verify all residents meeting transfer/discharge notification requirements received notification. Any issues observed will be addressed immediately. These audits will be reviewed 11/24/22 and monthly thereafter by the Quality Assurance Committee for 3 months and any reviewed for compliance.	

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F 623	Continued From page 4	F 623		

(MDS) with an Assessment Reference Date (ARD) of 8/8/22 revealed Resident #72 had a Brief Interview for Mental Status (BIMS) score of 15, which indicated she was cognitively intact.

During an interview with Resident #72 on 10/12/22 at 4:47 PM, she stated that she has not received a anything from the Social Worker in writing about her hospitalizations. Resident #72 said if it was left in her room her daughter must have taken it home. Resident #72 said she has been having periods of confusion and her daughter has been handling her business.

During an interview with Resident #72's daughter on 10/13/22 at 12:53 PM, she said she has not received a letter from the facility in writing about her mother going to the hospital. The daughter said the facility does notify her by phone when the resident is transferred to the hospital.

Resident #117

Record review of the "Face Sheet" revealed the facility admitted Resident #117 on 6/6/22 and she had diagnoses including Peripheral Vascular Disease, Type 2 Diabetes Mellitus, and Unspecified Atrial Fibrillation (abnormal heart rhythm).

Record review of the Discharge MDS with an ARD or 6/7/22 revealed Resident #117 was discharged to an acute hospital.

Record review of the "Departmental Notes" revealed a "Nurses Note" dated 6/7/22 at 10:27 AM that noted Resident #117 was transferred to the local hospital via stretcher for respiratory distress and decreased level of consciousness.

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F 623	Continued From page 5	F 623		

The family was notified by phone

Record review of the Discharge MDS with an ARD of 6/27/22 revealed Resident #117 was discharged to an acute hospital.

During an interview with the Director of Nursing (DON) on 10/12/22 at 1:30 PM, she stated that Resident #117 was transferred to the hospital directly from dialysis related to Atrial Flutter (abnormal heart rhythm) on 6/27/22.

Record review of the "Discharge Summary" dated 6/27/22 from the local hospital revealed Resident #117 was transferred to the local hospital.

Record review of the Discharge MDS with an ARD of 7/1/22 revealed Resident #117 was discharged to an acute hospital.

Review of the "Departmental Notes" revealed a "Nurses Note" dated 7/1/22 at 12:33 PM, noted Resident #117 was transferred to a local hospital from the dialysis unit due to severe tachycardia (increased heart rate) and chest pain.

Record review of the Quarterly MDS with ARD of 9/12/22 revealed Resident #117 had a Brief Interview for Mental Status (BIMS) of 14, which indicated she was cognitively intact.

During an interview on 10/11/22 at 02:15 PM, with the Resident #117's daughter, she said she has not received a letter from the facility letting her know her mother was sent to the hospital.

During an interview with the Social Worker on 10/12/22 at 1:04 PM, she said she either mailed the written notification of transfer to the family or

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F 623	Continued From page 6 placed them at the bedside when the resident was transferred to the hospital. She stated that she did not keep a copy of the document to be placed in the residents' medical records because she did not know that she needed to keep a copy. During an interview with the Administrator on 10/13/22 at 1:00 PM, he said the Social Worker told him that she mailed the transfer letters to the families. The Social Worker also said she left the residents that are their own responsible party letters at their bedside.	F 623		
F 625 SS=D	Notice of Bed Hold Policy Before/Upon Trnsfr CFR(s): 483.15(d)(1)(2) §483.15(d) Notice of bed-hold policy and return- §483.15(d)(1) Notice before transfer. Before a nursing facility transfers a resident to a hospital or the resident goes on therapeutic leave, the nursing facility must provide written information to the resident or resident representative that specifies- (i) The duration of the state bed-hold policy, if any, during which the resident is permitted to return and resume residence in the nursing facility; (ii) The reserve bed payment policy in the state plan, under § 447.40 of this chapter, if any; (iii) The nursing facility's policies regarding bed-hold periods, which must be consistent with paragraph (e)(1) of this section, permitting a resident to return; and (iv) The information specified in paragraph (e)(1) of this section. §483.15(d)(2) Bed-hold notice upon transfer. At the time of transfer of a resident for	F 625		11/25/22

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F 625	Continued From page 7 hospitalization or therapeutic leave, a nursing facility must provide to the resident and the resident representative written notice which specifies the duration of the bed-hold policy described in paragraph (d)(1) of this section. This REQUIREMENT is not met as evidenced by: Based on interviews, record review, and facility policy review the facility failed to provide written documentation records related to bed hold upon resident transfer to the hospital for two (2) of four (4) residents reviewed for hospitalizations. Resident #72 and Resident #117. Findings Included: Review of the facility's policy, titled "Bed-Holds and Returns," dated March 2017 revealed prior to transfers and therapeutic leaves, residents or resident representatives will be informed in writing of bed-hold and return policy. Resident #72 Record review of the "Face Sheet" revealed the facility admitted Resident #72 on 5/6/22 and she had diagnoses of Chronic Diastolic Congestive Heart Failure and Chronic Kidney Disease, Stage IV. Record review of the Discharge Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 8/23/22 revealed Resident #72 was discharged to an acute hospital. Record review of the "Departmental Notes" revealed a "Nurses Note" dated 8/23/22 at 5:20 PM, which noted Resident #72 was transferred to the local hospital and the family was notified by	F 625	1) On 10/13/2022 Resident #72 and Resident #117 were reviewed for bedhold notification by Social Services Director and revealed the facility failed to keep a copy of mailed notification as required. Resident #72 and Resident #117 were mailed another copy of the bedhold notification on 10/26/22 by Social Services Director. 2) All 143 residents could be affected by this deficient practice. 3) On 10/25/22, an in-service was conducted by Administrator with Social Services Director as well as Business Office Director in regards to providing "Bedhold Notification". On 10/27/22 the Quality Assurance Committee reviewed the policy on "Bedhold Notification" and no changes were recommended at this time. 4) The facility Business Office Director will monitor effective 10/28/22 and review all discharges daily for 4 weeks and verify all residents meeting bedhold notification requirements received proper notification. Any issues observed will be addressed immediately. These audits will be reviewed 11/24/22 and monthly thereafter by the QA Committee for 3 months.	

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F 625	Continued From page 8	F 625		

phone.

Record review of the Discharge MDS with an ARD of 9/23/22 revealed Resident #72 was discharged to an acute hospital.

Record review of the "Departmental Notes" revealed a "Nurses Note" dated 9/23/22 at 3:44 PM, which noted Resident #72 was transferred to a behavioral unit and the family was notified by phone.

Record review of the Quarterly MDS with ARD of 8/8/22 revealed Resident #72 had a Brief Interview of Mental Status (BIMS) score of 15, which indicated she was cognitively intact.

On 10/12/22 at 4:47 PM, in an interview with Resident #72, she stated she has not received any letters from the Social Worker when she was transferred to the hospital. Resident #72 commented that if any paperwork was left in her room, then her daughter must have taken it home. She admitted that she has had periods of confusion and now her daughter handles her business for her.

On 10/13/22 at 12:53 PM, in an interview with Resident #72's daughter, she stated that she has not received anything from the facility related to her mother going to the hospital.

Resident #117

Record review of the "Face Sheet" revealed the facility admitted Resident #117 on 6/6/22 and she had diagnoses including Peripheral Vascular Disease, Type 2 Diabetes Mellitus, and Unspecified Atrial Fibrillation (abnormal heart

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rhythm).

Record review of the Discharge Minimum Data Set (MDS) with an Assessment Reference Date (ARD) or 6/7/22 revealed Resident #117 was discharged to an acute hospital.

Record review of the "Departmental Notes" revealed a "Nurses Note" dated 6/7/22 at 10:27 AM that noted Resident #117 was transferred to the local hospital via stretcher for respiratory distress and decreased level of consciousness. The family was notified by phone

Record review of the Discharge MDS with an ARD of 6/27/22 revealed Resident #117 was discharged to an acute hospital.

On 10/22/22 at 1:20 PM, in an interview with the Director of Nursing (DON), she verified that on 6/27/22, Resident #117 was transferred to the hospital directly from the dialysis unit and not from the facility. She was sent to the hospital due to Atrial Flutter (abnormal heart rhythm).

Record review of the "Discharge Summary" dated 6/27/22 from the local hospital revealed Resident #117 was transferred to the local hospital.

Record review of the Discharge MDS with an ARD of 7/1/22 revealed Resident #117 was discharged to an acute hospital.

Review of the "Departmental Notes" revealed a "Nurses Note" dated 7/1/22 at 12:33 PM, noted Resident #117 was transferred to a local hospital from the dialysis unit due to severe tachycardia (increased heart rate) and chest pain.

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F 625	Continued From page 10	F 625		

Record review of the Quarterly MDS with ARD of 9/12/22 revealed Resident #117 had a Brief Interview for Mental Status (BIMS) of 14, which indicated she was cognitively intact.

During an interview on 10/11/22 at 02:15 PM with the Resident #112's daughter, she said she has not received a letter from the facility letting her know her mother was sent to the hospital.

On 10/12/22 at 1:04 PM, in an interview with the Social Worker, she either mailed the bed hold notifications or placed them at the bedside when the resident was transferred to the hospital. She confirmed that she does not keep a copy of the bed hold letter that she sends to the resident or resident representative. She was unaware that she should retain a copy of the notification that was mailed.

On 10/13/22 at 1:00 PM, in an interview with the Administrator, he stated that the Social Worker told him that she mailed the bed hold letters to the families or gives them to the resident when a resident transfers out of the facility.