

MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 57SE	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/08/2022
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

MCCOMB NURSING AND REHABILITATION CENTER I **415 MARION AVE**
MCCOMB, MS 39648

(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) COMPLETE DATE
M 000	Initial Comments The State Survey Agency (SSA) conducted an annual recertification survey with a Complaint Investigation (CI), MS #00019331 at the facility from 12/05/2022 to 12/08/2022. During the survey, the SSA determined that the facility was not in compliance with the regulations for Minimum Standards for Institutions for the Aged or Infirm. The SSA did not substantiate MS #00019331 related to environment and staffing, with no deficiencies cited. During the survey, the SAA cited M500.	M 000		
M 500	45.17.2 Residents' Rights Residents' Rights. The residents' rights policies and procedures ensure that each resident admitted to the facility: 1. is fully informed, as evidenced by the resident's written acknowledgment, prior to or at the time of admission and during stay, of these rights and is given a statement of the facility's rules and regulations and an explanation of the resident's responsibility to obey all reasonable regulations of the facility and to respect the personal rights and private property of other residents; 2. is fully informed, and is given a written statement prior to or at time of admission and during stay, of services available in the facility, and of related charges including any charges for services covered by the facility's basic per diem rate; 3. is assured of adequate and appropriate medical care, is fully informed by a physician or nurse practitioner/physician assistant of his medical conditions unless medically contraindicated (as documented by a physician or	M 500		1/16/23

Mississippi State Department of Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

12/29/22

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M 500	Continued From page 1 nurse practitioner/physician assistant in his medical record), is afforded the opportunity to participate in the planning of his medical treatment, to not be limited in his/her choice of a pharmacy or pharmacist provider in accordance with state law, as referenced in House Bill 1439, which states that the facility shall not limit a resident ' s choice of pharmacy or pharmacy provider if that provider meets the same standards of dispensing guidelines required of long term care facilities, to refuse to participate in experimental research, and to refuse medication and treatment after fully informed of and understanding the consequences of such action; 4. is transferred or discharged only for medical reasons, or for his welfare or that of other residents, or for nonpayment for his stay (except as prohibited by sources of third-party payment), and is given a two weeks advance notice in writing to ensure orderly transfer or discharge. A copy of this notice is maintained in his medical record; 5. is encouraged and assisted, throughout his period of stay, to exercise his rights as a resident and as a citizen, and to this end may voice grievances, has a right of action for damages or other relief for deprivations or infringements of his right to adequate and proper treatment and care established by an applicable statute, rule, regulation or contract, and to recommend changes in policies and services to facility staff and/or to outside representatives of his choice, free from restraint, interference, coercion, discrimination, or reprisal; 6. may manage his personal financial affairs, or is given at least a quarterly accounting of financial	M 500		

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M 500	Continued From page 2 transactions made on his behalf should the facility accept his written delegation of this responsibility to the facility for any period of time in conformance with State law; 7. is free from mental and physical abuse; 8. is free from restraint except by order of a physician or nurse practitioner/physician assistant, or unless it is determined that the resident is a threat to himself or to others. Physical and chemical restraints shall be used for medical conditions that warrant the use of a restraint. Restraint is not to be used for discipline or staff convenience. The facility must have policies and procedures addressing the use and monitoring of restraint. A physician order for restraint must be countersigned within 24 hours of the emergency application of the restraint; 9. is assured security in storing personal possessions and confidential treatment of his personal and medical records, and may approve or refuse their release to any individual outside the facility, except, in the case of his transfer to another health care institution, or as required by law of third-party payment contract; 10. is treated with consideration, respect, and full recognition of his dignity and individuality, including privacy in treatment and in care for his personal needs; 11. is not required to perform services for the facility that are not included for therapeutic purposes in his plan of care; 12. may associate and communicate privately with persons of his choice, may join with other residents or individuals within or outside of the facility to work for improvements in resident care,	M 500		

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M 500	Continued From page 3 and send and receive his personal mail unopened, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 13. may meet with, and participate in activities of, social, religious and community groups at his discretion, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 14. may retain and use his personal clothing and possessions as space permits, unless to do so would infringe upon rights of other residents, unless medically contraindicated (as documented by his physician or nurse practitioner/physician assistant in his medical record); 15. if married, is assured privacy for visits by his/her spouse; if both are inpatients in the facility, they are permitted to share a room, unless medically contraindicated (as documented by the attending physician or nurse practitioner/physician assistant in the medical record); and 16. is assured of exercising his civil and religious liberties including the right to independent personal decisions and knowledge of available choice. The facility shall encourage and assist in the fullest exercise of these rights. This Statute is not met as evidenced by: Level II Based on record review, Resident Bill of Rights review and staff interviews the facility failed to ensure residents had readily available and	M 500	Please consider this plan of correction as McComb Nursing and Rehabilitation Center, LLC, credible allegation of compliance. This plan of correction constitutes a written allegation of	

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M 500	Continued From page 4 reasonable access to their personal funds on weekends. This had the potential to affect 55 of 112 residents who had funds managed by the facility. Findings include: Record review of the facility's policy, "Resident Bill Of Rights", with a revision date of 11/2017, revealed, " ...A. Facility residents shall have the right to... 22. Manage his or her financial affairs. The resident must authorize the facility in writing to manage any personal funds and the facility must ensure the resident has reasonable and ready access to those funds ..." On 12/05/22 at 11:16 AM, in an interview with Resident # 29, he stated that he has a trust fund at the facility, but he is not able to get money on the weekends. He stated that if he wanted money for the weekends, it would have to be requested on Friday, as the lady that disperses the money does not work on weekends. On 12/7/22 at 3:40 PM, in an interview with the Manager of Payroll and Resident Trust Accounts, she confirmed residents cannot get money on weekends. She revealed that she checks with residents on Friday before she leaves, as she would be unavailable to assist residents with their monetary requests on weekends. On 12/7/22 at 4:38 PM, in an interview with Administrator, she confirmed staff are not available on weekends to assist residents with access to their personal funds, as she was unaware that residents wanted to get money on weekends. Record review of the "Statement Register" for the	M 500	substantial compliance under Federal Medicare and Medicaid requirements. Submission of this plan of correction is not an admission that a deficiency exist or that the facility agrees they were cited correctly. This plan of correction reflects a desire to continuously enhance the quality of care and services provided to our residents and are submitted solely as a requirement of the provisions of Federal and State Law. Resident #29 was made aware on 12/15/2022 by the Executive Director that funds in the Resident Trust account are available daily, including on the weekends. Residents that have funds in the Resident Trust Account have the potential to be affected. On December 16, 2022, the Executive Director in-serviced the Weekend Managers which include, Social Service staff, Activity staff, Business Office staff, and Admission Staff regarding the Residents Right to have access to their funds in the Resident Trust Fund account seven (7) days a week. Residents that attended the Resident Council Meeting on December 21, 2022 were informed by the Executive Director during the Resident Council Meeting that residents who have funds in the Resident Trust Account will be able to make withdrawals daily including on the weekends effective December 24, 2022. Residents who did not attend the	

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M 500	Continued From page 5 month of December 2022 revealed Resident #29 has an active account with the facility. Record review of the "Resident #29 "Face Sheet," revealed the facility admitted the resident to the facility on 12/18/2014, with medical diagnoses including Type 2 Diabetes Mellitus and Hypothyroidism. Record review of the Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 9/27/2022, revealed a Brief Interview of Mental Status (BIMS) score of 09, which indicated the resident had moderate cognitive impairment. Record review of the facility's "Active Patient Trust Accounts," revealed Resident #29, along with 54 other residents currently have a trust account with the facility.	M 500	Resident Council Meeting were informed by the Social Service Department on December 21, thru December 23, 2022 of the availability of funds on the weekends. The Weekend Managers will notify residents in person and by announcing over the intercom regarding availability of funds on Saturday and Sunday. The Social Service Director and or the Social Service Assistant will interview ten (10) residents a week that have a Resident Trust Fund account beginning December 28, 2022 for four (4) weeks and then ten (10) residents monthly for two (2) months to ensure they were able to access their funds from the Resident Trust Fund on weekends. The Social Service Director will submit the results of the interviews to the Quality Assurance Committee on January 16, 2022 and then for two consecutive months. The Quality Assurance Committee will make recommendations as necessary.	