MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	07CC	A. BUILDING: _____ B. WING _____	05/16/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BAPTIST NURSING HOME-CALHOUN, INC	152 BURKE CALHOUN CITY ROAD CALHOUN CITY, MS 38916

(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 Agency (SA) conducted an annual recertification survey at the facility from 5/13/19 to 5/16/19. During the survey, the SA determined that the facility was not in compliance with the Minimum Standards for Institutions for the Aged and Infirm. The SA cited M500. The census at the time of the survey was 98, and the facility was licensed for 120 beds.	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 nurse practitioner/physician assistant in his medical record), is afforded the opportunity to	M 500		6/20/19

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M 500	Continued From page 1 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 transactions made on his behalf should the facility accept his written delegation of this	M 500		

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M 500	Continued From page 2 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, and send and receive his personal mail unopened, unless medically contraindicated (as	M 500		

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M 500	Continued From page 3 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 resident interview, staff interview, and facility policy review the facility failed to ensure mail delivery was available to residents on weekends for nine (9) of 9 residents in attendance at the Resident Council Meeting; and	M 500	**Corrective actions accomplished for residents found to be affected by the deficient practice of failing to ensure mail delivery on the weekends: Request made to Post Master to have Nursing Home mail delivered to our	

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M 500	Continued From page 4 all residents residing in the facility at the time of survey. Findings include: Review of the facility's policy titled, "Mail Distribution", not dated, revealed, Procedures: 1. Deliver the mail addressed to Elder/patients unopened within 24 hours of mail delivery time to the home by postal service. 6. The Life Facilitator Team will be responsible for the delivery of the mail to Elder's at this home and hospital. In an observation and observation, on 5/14/19 at 3:00 PM, a Resident Council meeting was held, with 9 residents in attendance. All residents in attendance at the meeting stated,they do not get mail delivered to them at the facility on Saturday. On 5/14/19 at 3:50 PM, an interview with the Activity Director (AD), revealed, she stated, "As far as I know, the residents have never gotten mail on Saturday, at least not since I've been working here." On 5/14/19 at 3:55 PM, an interview with the facility's Secretary, revealed, mail is delivered to the hospital daily and brought to the nursing home, but there is no one there to get it on Saturday, so it is not delivered to our facility on Saturday. On 5/15/19, an interview with the Social Worker (SW), revealed, she stated, "As far as I am aware, there is no mail delivered here on Saturday, and yes, they should be able to get their mail every day if they have some."	M 500	mailbox on site daily beginning on May 21, 2019. Nursing Home would place a mailbox on site due to all mail currently being delivered to Baptist Hospital. Saturday, May 25, 2019 Activity Department delivered all mail received to residents in facility. **Identification of other residents having the potential to be affected by the same deficient practice: Ninety eight residents who presently reside at the facility have the potential to be affected by the deficient practice of failing to ensure weekend mail delivery. **Measures put into place or systemic changes made to ensure the deficient practice will not recur: Mailbox on site for daily mail delivery. On May 20, 2019 Life Facilitator Leader educated staff on Policy #015 titled Mail Distribution. Activity staff made aware of location of facility mailbox and need for obtaining and distributing mail on Saturdays. Activity staff will initial calendar sheet weekly on Saturday once mail delivery is complete. **Facility plan to monitor its performance to make sure the solutions are sustained: This corrective action will be monitored by the Quality Assurance Coordinator appointing the Life Facilitator Leader to complete a Quality Assurance (QA) titled "Saturday Mail Delivery" weekly on Monday morning beginning on June 3,	

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M 500	Continued From page 5	M 500	2019 x four (4) weeks and monthly thereafter. This Quality Assurance form has been implemented and the corrective action evaluated for effectiveness. This deficiency, the corrective action and any further problems noted will be presented to the Quality Assurance Committee for review and possible recommendations.	