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
	67WC	A. BUILDING: _____ B. WING _____	12/08/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WALTER B CROOK NURSING FACILITY	840 NORTH OAK AVENUE RULEVILLE, MS 38771

(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 re-certification survey at the facility from 12/5/22 to 12/8/22. The SA determined that the facility was in compliance with the Mississippi Regulations for Minimum Standards for Institutions for Aged or Infirm and cited no deficiences.	M 000		
M 190	45.2.33 Restraint Restraint. The term "restraint" shall include any means, physical or chemical, which is intentionally used to restrict the freedom of movement of a person. This Statute is not met as evidenced by: Level II Based on observations, staff and resident interviews, facility policy review, and record review, the facility failed to keep residents free from physical restraints for one (1) of 20 residents reviewed during the survey. Resident #2 Findings include: Review of the facility policy titled, "Restraints - Definitions", dated 12/1/14, revealed: 1. Physical restraints Any manual method or physical or mechanical device material or equipment attached or adjacent to the resident's body that the resident cannot remove easily which restricts freedom of movement for normal access to one's body. 2. Side Rails a. Side rail use is addressed in the same manner as any other restraint. b. side rails used as an enabler must be	M 190	1. Resident # 2 had side rails removed on 12/07/22 by maintenance personnel. Resident # 2 had side rail/assist bar assessment on 12/08/22 by the Care Plan Coordinator. A 100% audit of all beds with side rails in use were reviewed for appropriate use. No other resident beds were found with inappropriate use of side rails. 2. This has the potential to affect every resident who has side rails in use. 3. Staff Practical Nurses and Registered Nurses were in-serviced on the appropriate use of side rails, side rail assessment form and the facility side rail policy on 12/08/22 & 12/09/22. The Director of Nursing and the In-service Coordinator conducted the inservice. A Side Rail Assessment form was completed on each resident actively	1/9/23

Mississippi State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		12/27/22

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M 190	Continued From page 1 supported by documentation. c. The use of side rails as restraints is prohibited unless they are necessary to treat a resident's medical symptoms. d. Residents who attempt to exit a bed through between over or around side rails are at risk of injury or death. e. The potential for serious injury is more likely from a fall from a bed with raised side rails than from a fall from a bed where side rails are not used. f. If the resident is immobile and cannot voluntarily get out of bed due to a physical limitation, the bed rails do not meet the definition of a restraint. g. The same device may have the effect of restraining one individual but not another, depending on the individual resident's condition and circumstances. For example, partial rails may assist one resident to enter and exit the bed independently while acting as a restraint for another. h. Full side rails may be one or more rails along both sides of the residence bed that block 3/4 to the whole length of the mattress from top to bottom including: beds with one side placed against the wall (prohibiting the resident from entering and exiting on that side) and the other side blocked by a full rail (one or more rails) j. Side Rails Used a Positioning Devices - if the side rail has the effect of restraining the resident and makes the definition of a physical restraint for that individual, the facility is responsible to assess the appropriateness of that restraint. k. Side Rails Used with Residents Who Are Immobile i. if the resident is immobile and cannot voluntarily get out of bed due to physical limitation and not due to a restraining device or because proper assistive devices were not present, the	M 190	residing in the facility on 12/08/2022 by the Care Plan Coordinator to determine if side rails were needed. 4. A monitor involving a 100% audit of beds for bed rail use was started by the (DON) Director of Nurses on 12/07/22 and will be conducted weekly for three weeks then monthly for three months. The (DON) Director of Nursing shall bring findings of assigned audits to the Quality Assurance Committee on January 05,2023 then monthly for three months and as needed for review/revision and/or changes in the current plan of action to obtain substantial compliance.	

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M 190	Continued From page 2	M 190		

bed rails do not make the definition of a restraint.
ii. For residents who have no voluntary movement, the staff needs to determine if there is any appropriate use of bed rail.

An observation, on 12/05/22 at 03:42 PM and 12/07/22 at 10:15 AM revealed Resident #2 in bed with full rails up on each side of the bed.

An observation and interview, on 12/07/22 on 12:20 PM with the Director of Nursing (DON) concerning Resident #2, revealed that the side rails were considered a restraint.

An interview on 12/8/22 at 11:20 AM with Resident #2 revealed that she was glad the rails were off. She stated they took up all my room in the bed and she would bump her legs on them sometimes. Resident #2 stated that now she could sit up by herself.

Review of the physican orders dated 1/20/22 revealed may use side rails for mobility and to aid in turning and repositioning.
Record review of the side rail assesment dated 11/14/22 revealed the reason side rails are being utilized is to increase bed mobility and allow resident to shift his/her weight. The number of rails indicated for use is two (2).

Record review of Resident #2's Face Sheet revealed she was admitted to the facility on 3/9/21 with diagnoses that include Chronic Congestive Heart Failure, Rheumatoid Arthritis, Type 2 Diabetes Mellitus.

Record review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 11/14/22 revealed a Brief Interview for Mental Status (BIMS) score of 12 which indicated

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M 190	Continued From page 3 Resident #2 was moderately impaired. An interview, on 12/7/22 at 3:00 PM with the DON revealed she did not realize they had so many beds with full rails up. She stated that they are working now on getting rails changed throughout the facility. An interview with the administrator (ADM) on 12/8/22 at 9:15 AM revealed that he understands the regulation but, in his mind they had considered the side rails as safety for the residents. He stated there had been no injuries related to side rail use. An interview, on 12/8/22 at 10:50 AM with the Care Plan Coordinator (CPC) revealed she does side rail assessments on residents. She stated that she goes to the room and does a complete assessment. The CPC stated that she did not feel like she had seen a resident who did not not need their side rail, full or otherwise.	M 190		