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
	77RA	A. BUILDING: _____ B. WING _____	12/16/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PINE VIEW HEALTH AND REHABILITATION CENTER	1304 WALNUT ST WAYNESBORO, MS 39367

(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 along with MS Complaint #19736 at the facility from 12/12/2022 through 12/16/2022. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm and cited M500. The SA did not cite any deficient practice related to CI#19736 related to a fall with injury. At the time of survey, the facility held a license for 90 beds and the facility census was 87.	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	M 500		1/24/23

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M 500	Continued From page 1 medical conditions unless medically contraindicated (as documented by a physician or 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;	M 500		

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M 500	Continued From page 2 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 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	M 500		

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M 500	Continued From page 3 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 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: Based on resident interview and record review, the facility failed to ensure a resident's money was secured when she was transferred for a	M 500	M 500 Resident Rights Resident #8, 12, 13, 14, 15, 19, 20, 53,	

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M 500	Continued From page 4 hospital stay for one (1) of one (1) resident. Resident #8 An interview on 12/12/22 at 09:42 AM with Resident #8 revealed she was admitted to the hospital in July 2022 and had a stay of over 2 weeks. Resident #8 stated when she came back from the hospital she noticed that items had been moved around in her room. Resident #8 stated prior to her hospitalization she had $160.00 in a small cardboard box that was sealed up with tape under her Sunday school book and her Bible was on top of the box. Upon return from the hospital her Bible had been moved and the money was missing. Resident #8 stated she informed the Social Service Director (SSD) that her money was missing. A review of the facility's grievance log revealed Resident #8's missing money was listed on the grievance log on July 18, 2022. A review of the grievance investigation report regarding Resident #8's missing money revealed the SSD looked for the money in the resident room and could not find it. There was no indication the money was replaced by the facility. An interview on 12/14/22 at 3:53 PM with the SSD confirmed when Resident #8 returned from her hospital stay, the resident told the SSD her money was missing that had been under her Bible in an envelope. The SSD stated she looked for the money but could not find it. The SSD stated she spoke with the resident's niece (Niece #1) regarding the lost money and the resident's niece told her the resident probably misplaced it, and not to worry about replacing it. In an interview on 12/14/22 at 4:34 PM with Niece	M 500	and 62 interviewed for likes and dislikes by Social Service Director on January 5, 2023. Likes and dislikes update on dietary meal card by Dietary Manager on January 9, 2023. Food Committee meeting held on December 21, 2022 by Registered Dietician and Director of Nursing. Resident #8 money replaced on December 29, 2022. Money was paid by the facility petty cash. All residents have the potential to be affected. Social Service Director in serviced on resolving grievances on January 6, 2023, by Executive Director. All residents interviewed for dietary likes and dislikes beginning on January 5, 2023 and ending on January 9, 2023, by Dietary Manager and Social Service Director. Resident #8 provided lock box for personal items on December 21, 2022. Administrator, Director of Nursing, and Registered Dietician to sample meal tray weekly, beginning on January 6, 2023 for three (3) months. Grievances will be brought to Department Head morning meeting each morning and discussed, to include, status of either needing further investigation or to be resolved, beginning January 6, 2023. All unresolved Grievances will be brought to morning meeting and discussed until resolved. Findings were brought to the Quality Assurance Performance Improvement Committee by Social Service Director on December 16, 2022. Administrator began to interview cognitive residents with a Brief	

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M 500	Continued From page 5 #1 she denied anyone at the facility had contacted her regarding any missing money. Niece #1 stated she gives resident money when she visits with the resident and had given money to the resident in July. Niece #1 stated she knew it was over $100.00 but she wasn't sure exactly how much. An interview on 12/14/22 at 4:42 PM with Resident #8's niece (Niece #2) revealed Resident #8 told her about money missing from her room after she returned from a hospitalization. Niece #2 confirmed Niece #1 gives the resident money when she visits. Niece #2 stated no one from the facility had spoken to her about the resident missing any money. Review of Resident #8 Admission Record revealed the resident was admitted by the facility on 9/27/20 with medical diagnoses including Essential Primary Hypertension and Recurrent Depressive Disorder. Review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 10/22/22 revealed and Brief Interview of Mental Status score of 15 which indicated the resident was cognitively Intact.	M 500	Interview Mental Status (BIMS) greater than 12 on January 6, 2023 to determine any grievances. Administrator will continue resident interviews weekly times three (3) weeks, then monthly times three months. Findings will be brought to the Quality Assurance Performance Improvement Committee by Administrator, monthly for three (3) months beginning January 23, 2023 to determine effectiveness and make necessary changes as indicated.	