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	255093	A. BUILDING _____ B. WING _____	C 02/03/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE PILLARS OF BILOXI	2279 ATKINSON ROAD BILOXI, MS 39531

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F 000	INITIAL COMMENTS The State Agency (SA) conducted a Complaint Investigation (CI), MS #20281, MS #20268, and MS #19966, at the facility, from 2/2/23 through 2/3/23. MS #20268 was related to the facility's environment, offensive odors in the facility, rehabilitations services, resident falls, inappropriate feeding assistance, and billing. During the survey, the SA determined the facility was not in compliance with the requirements for participation in Medicare and Medicaid and cited F584 related to the facility's physical environment. The facility was found to be in compliance for MS #20281 related to Administration and for MS #19966 related to resident neglect. The facility held a license for 180 beds, with a census of 142.	F 000		
F 584 SS=E	Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7) §483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. The facility must provide- §483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. (i) This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. (ii) The facility shall exercise reasonable care for the protection of the resident's property from loss	F 584		3/3/23

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

Electronically Signed | 02/23/2023

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F 584	Continued From page 1 or theft. §483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior; §483.10(i)(3) Clean bed and bath linens that are in good condition; §483.10(i)(4) Private closet space in each resident room, as specified in §483.90 (e)(2)(iv); §483.10(i)(5) Adequate and comfortable lighting levels in all areas; §483.10(i)(6) Comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 to 81°F; and §483.10(i)(7) For the maintenance of comfortable sound levels. This REQUIREMENT is not met as evidenced by: Based on observation, interviews, record review and facility policy review, the facility failed to provide adequate housekeeping and maintenance services necessary to ensure the resident's rights to a safe, clean environment for three (3) of 25 resident rooms on the East Wing and the East Wing lounge. (Resident #3, Resident #4, and Resident #5 and Resident #6) Findings include: Review of the facility's policy, "Housekeeping" dated April 13, 2021, revealed, " ...It is the policy of this facility that nursing services personnel perform routine housekeeping functions related to	F 584	1. The Administrator spoke with residents #3, #4, #5 and #6 on 02/06/2023 to address the environmental concerns in their rooms, bathroom and common area. All residents were explained their right to a safe, clean and comfortable home-like environment and were explained the plan to make the necessary improvements, repairs, and equipment replacement to their rooms that impacted those rights. The overbed tables for resident #3 and #4 were replaced on 02/02/2023. The bed for resident #5 was replaced on 02/02/2023. Repairs to all rooms, bathrooms, common areas and equipment were initiated on	

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F 584	Continued From page 2 nursing care ...2. The housekeeping department will perform routine and daily cleaning services ..." Review of the facility's policy, "Maintenance Service" dated June 2000, revealed, " ...It is the policy of this facility that maintenance service be provided to all areas of the building, grounds and equipment. Procedure 1. The maintenance department is responsible for maintaining the buildings, grounds, and equipment in a safe and operable manner at all times; 2. The following functions are performed by maintenance, but are not limited to: a. Maintaining the building in compliance with current federal, state and local laws regulations and guidelines; b. Maintaining the building in good repair and free from hazard ...d. Maintaining the heat/cooling system ...in good working order ..." Resident #3's Room: On 2/02/23 at 10:50 AM, during an environmental tour of the East Wing with the Director of Nurses (DON), in Resident #3's room, the overbed table had an unstable, wobbly tabletop that was not even and slanted downward. There was also laminate missing from the top of the overbed table in which the particle board was visible and the base of the table was rusted. The DON described the overbed table as "rusty". There was an area or discoloration on the floor next to the baseboard. On 2/02/23 at 10:54 AM, an interview with Housekeeper #1, she stated she was assigned to cleaning the rooms of the East Wing which included sweeping the floor next to the baseboards and in corners of the room and	F 584	02/03/2023 and will be completed on 03/30/2023 by the Maintenance Supervisor and Maintenance Assistant. Cleaning of all rooms, bathrooms and common area were initiated on 02/02/2023 and completed on 02/03/2023. 2. All residents have the potential to be affected by the deficient environmental practice that can impact their right to a safe, clean, and comfortable home-like environment. 3. The Administrator along with the Maintenance Supervisor and the Housekeeping Supervisor collaborated on 02/06/2023 to prioritize repairs and housekeeping tasks for environmental issues on the unit where residents #3, #4, #5, and #6 reside. The housekeeping staff were educated by the Housekeeping Supervisor on proper housekeeping procedures on 02/06/2023. The Administrator as well as the Maintenance Supervisor and Housekeeping Supervisor inspected other resident rooms on 02/07/2023. Identified concerns on 2/7/2023 pertaining to housekeeping were addressed with the housekeeper assigned to the unit concern was identified and followed up by the Housekeeping Supervisor at the end of that housekeeper's shift to ensure the concern was effectively addressed. Maintenance concerns were added to Maintenance request log and prioritized for completion. Housekeeping Supervisor and Maintenance Supervisor will inspect all	

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F 584	Continued From page 3 included cleaning the baseboards. She was responsible for "sweeping, getting up the trash off the floor, and spot mop" of the floors in the resident rooms. She stated she thought the discoloration of the floor next to the baseboard in Resident #3's room was a stain and that it "won't come up", however the grayish discoloration next to the baseboard wiped off with a paper towel and plain water. Housekeeper #1 agreed, "I see that it came off". Resident #4's Room: On 2/02/23 at 11:13 AM, during an observation of Resident #4's room and an interview with the DON, the overbed base was as diffusely covered with rust. The DON confirmed the observation of the overbed table being "rusty". There were spider webs noted between the bedside table and the wall near the floor and near the top of the bedside table. There was a brown/gray substance on the floor along the wall below the window which was easily wiped off with tissue and plain water. The DON confirmed the substance appeared to be "dust or dirt" and described the spider webs noted between the nightstand and the wall as "cobwebs". On 2/03/23 at 10:10 AM, during an observation and an interview with Resident #4 in his room, he stated he had noticed the spiderwebs next to the head of his bed that stretched between the nightstand and the wall and that he had not seen any housekeeper dusting anything in his room. Record review of the Admission Record for Resident #4 revealed he was admitted by the facility on 9/03/20 with a diagnoses of Acute Kidney Failure .	F 584	rooms, bathrooms and common areas once a week to ensure these issues are not systemic to the facility in order to protect residents from similar situations and bring their findings and solutions to the weekly environmental rounds meeting beginning 02/06/2023 and ending 05/30/2023. 4. The facility will monitor these environmental issues to ensure the plan of correction is sustained by department heads conducting once a week environmental rounds that include ALL resident rooms, bathrooms, and common areas starting on 02/06/2023 and ending 05/30/2023 to identify deficient environmental practices. These findings will be recorded in the Maintenance Request Log upon completion of rounds and will be discussed in monthly Quality Assessment and Performance Improvement (QAPI) meetings beginning 02/22/2023 and ending 5/30/2023 to evaluate effectiveness of plan of correction for maintenance services. These findings will be compared to the environmental rounds book and to the Maintenance Request Log books to ensure any environmental issues have been addressed with an immediate plan of correction for any unresolved issue beginning on 02/22/2023 and ending 5/30/2023. The Housekeeping Supervisor will make weekly rounds to inspect resident rooms, common areas, and bathrooms to ensure residents rooms, common areas, and bathrooms are appropriately cleaned and will bring her	

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F 584	Continued From page 4 Record review of the Quarterly Minimum Data Set (MDS) with Assessment Reference Date (ARD) of 10/31/22 for Resident #4 revealed he had a Brief Interview for Mental Status (BIMS) score of 12 which indicated he had mild cognitive impairment. Resident #5's Room: On 2/02/23 at 11:33 AM, during an interview with the DON and observation of Resident #5's room, revealed the foot board and crank handle was missing from the bed. The air conditioner (AC) cover was missing and there was a green leaf visibly growing through the air conditioner. Upon removal of the AC filter, there was a slender green stem with leaves protruding upward through the unit. The DON stated she had no comment regarding the plant. On 2/02/23 at 11:35 AM, during an interview with Resident # 5, he stated that the air conditioner and the bed had been in disrepair "a long time". He also said that he was not aware that the bed's crank handle was broken and missing. He had reported the footboard was missing from his bed to someone, but he was unable to recall who he had reported it to. Record review of the Admission Record for Resident #5 revealed he was originally admitted by the facility on 4/21/20. He had diagnoses of Hemiplegia and Hemiparesis following Cerebral Infarction Affection Right Dominant Side. Record review of the Annual MDS with reference date 1/02/23 for Resident #5 revealed he had a BIMS score of 15, which indicated no cognitive	F 584	findings to the monthly QAPI meetings beginning on 02/22/2023 and ending on 5/30/2023 to evaluate effectiveness of plan of correction for housekeeping services.	

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impairment.

Resident Bathroom (Resident #4, #5, #6)

On 2/02/23 at 11:20 AM, in an interview with the DON and observation in the resident shared bathroom for Residents #4, #5 and #6 revealed the floor surrounding the toilet was discolored a rust color and the bolts that held the toilet down were entirely covered in a rough textured, rust colored substance. There was a twelve-by-twelve-inch (12X12) hole in the wall just above the baseboard on the wall opposite the toilet where the sheet rock was not missing but had been knocked in and the structure behind the sheet rock was visible. The baseboard below the hole was loose and pulled away from the wall approximately one quarter inch. The entire door facing for the door between the bathroom and Resident #6's room was covered diffusely, but consistently in a gray/black substance which wiped off easily with tissue and plain water. The DON confirmed the floor around the toilet and the bolts were "rusted", that there was a hole in the wall of the bathroom (which she stated she had been unaware of), that the baseboard was pulled away from the wall opposite the toilet and said that she saw but did not know what the gray/black substance on the door facing of the bathroom door was.

On 2/02/23 at 11:40 AM, during an interview with Resident #6, he said he thought the housekeeping staff could do better, the facility could do with a little more cleaning, and that some things get overlooked, like the hole in the wall.

Record review of the Admission Record for

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Resident #6 revealed he was admitted by the facility on 9/16/22 with a diagnosis of Intracerebral Hemorrhage.

Record review of the Quarterly MDS with ARD 12/19/22 for Resident #6 revealed he had a BIMS score of 9, which indicated moderate cognitive impairment.

Resident Common Area (Lounge)

On 2/02/23 at 3:05 PM, an observation revealed the exit door leading from the lounge of the East Wing to the hallway which led to the front entrance was painted yellow with the yellow paint scratched off in various areas and all paint scratched off in other areas (about five feet from the floor). The wall next to the exit door, near the Resident lounge had an eight- and one-half inch by eleven inch (8 ½ X 11 inch) area where the yellow paint was missing and the blue paint beneath was peeling off of the wall that revealed white paint beneath. The exit door to the outside in the East Wing lounge was scuffed and scarred and had the appearance of being dirty due to spots and streaks of brownish discoloration. There were gray spider webs on the right side of the exit door frame that stretched between the door frame and the activity room door frame.

On 2/02/23 at 3:10 PM, during an interview with Resident #4 in the Resident Lounge, he described the walls as "scuffed and dirty."

On 2/02/23 at 3:30 PM, an observation of the interior wall below the window next to the exit door to the outside revealed the sheetrock collapsed inward. The baseboard below the window was pulled away from the wall

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approximately one quarter inch (1/4 inch) and the floor along the wall under the windows and along the perpendicular wall and under the table situated in the corner had stains and a grayish substance which wiped away easily with a disposable antimicrobial wipe.

On 2/02/23 at 3:40 PM, during an interview with the Maintenance Supervisor, he stated that the exit doors in the Resident Lounge needed to be painted.

On 2/02/23 at 3:50 PM, during an interview with the Housekeeping Supervisor, she stated that the Resident Lounge on the East Wing needs a little more attention.

On 2/03/23 at 9:55 AM, during an interview with Licensed Practical Nurse (LPN) #1 confirmed he was routinely assigned to care for residents on the East Wing. He stated he entered the rooms of Residents #3, #4, #5 and #6 during his shifts and that he had not noticed the missing air conditioner cover, the green plant growing through the air conditioner, or the missing footboard and broken crank handle on Resident #5's bed. Regarding the hole in the wall of the residents' bathroom, LPN #1 stated "I thought that was fixed a while back".

A record review of the Maintenance Work Orders Binder at the East Wing Nursing Station revealed there was no documentation regarding the disrepair of overbed tables, footboards, bed cranks, missing AC cover, or holes in the walls.

On 2/03/22 at 12:05 PM, during an interview the Housekeeping Supervisor, she stated that the housekeepers were assigned to blocks of rooms

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and were supposed to dust, sweep and spot mop each room daily. She stated that housekeepers were instructed to record any problem that required attention of the maintenance department in the maintenance logs at the nurses station for communication with the maintenance department, but was not sure all housekeepers had that information. She stated training for housekeepers included "to clean". She stated she was responsible for assessment of cleanliness of the facility and for making sure housekeepers were providing adequate cleaning services. She stated that the presence of spider webs was an indication that an area had not been cleaned or dusted. She stated "That means they (housekeepers) are not dusting. It shouldn't be that way.".

On 2/03/22 at 12:25 PM, in an interview with the Floor Technician, he stated that he was responsible for the cleaning of the floors in the common areas such as the Resident Lounge and in the hallways. He confirmed the floor machine had been broken for approximately a month. He stated he did not wet mop all hallways and common areas daily but did mop them "some days" based on a revolving schedule and spot mopped on other days. He stated there should not be a problem getting floors clean next to the baseboards, behind doors, in corners or around door frames.

On 2/03/23 at 1:35 PM, an interview with the Maintenance Supervisor, he explained that the overbed tables cannot be repaired and are "just gone and have to be replaced." He stated that the bed for Resident #5 needed to be replaced due to the broken footboard and broken crank handle.

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F 584	Continued From page 9 On 2/03/23 at 2:00 PM, during an interview the Administrator, she explained that she became Administrator at the facility approximately three weeks prior on January 21, 2023. She confirmed the bed and air conditioner unit for Resident #5 and the overbed tables "needs to be replaced." She verified that she had observed the maintenance and housekeeping issues on the East Wing and stated, "We can do better, and we will do better. We can do that".	F 584		