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
	49WM	A. BUILDING: _____ B. WING _____	C 06/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINONA MANOR HEALTH CARE AND REHABILITATIC	627 MIDDLETON ROAD WINONA, MS 38967

(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 a Complaint Investigations (CI) at the facility for four (4) complaints, CI MS #21378, CI MS #21502, CI MS#21807 and CI MS #21707 from 6/13/2023 through 6/15/2023. During the survey, the SA determined the facility was not in compliance with the Mississippi Regulations for Minimum Standards for Institutions for the Aged or Infirm. The SA investigated CI MS #21378 for Misappropriation of Property and cited M500 for Resident Rights. The SA investigated CI MS #21807 for Misappropriation of Property and did not cite any deficiencies. The SA investigated CI MS #21707 for Neglect and Quality of Care/Treatment and did not cite any deficiencies. The SA investigated CI MS #21502 for Quality of Care/Treatment: Staffing, Nursing Services and Pharmaceutical Services and did not cite any deficiencies. At the time of survey, the facility had a census of 106 residents and was licensed for 120 beds.	M 000		
M 500 SS=D	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	M 500		7/24/23

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M 500	Continued From page 1 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 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	M 500		

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M 500	Continued From page 2 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 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,	M 500		

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M 500	Continued From page 3	M 500		

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 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

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M 500	Continued From page 4 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, staff interviews and policy and procedure review, the facility failed to protect a resident from misappropriation of property as evidenced by a Certified Nurse Aide (CNA) withdrew money from a resident's account and deposited the money into her account for one (1) of four (4) residents reviewed for misappropriation. Resident #1 Findings include: Record review of the facility's policy titled "Abuse, Neglect, Exploitation & Misappropriation" policy and procedure with a revision date of 11/16/2022 revealed "page 4 of 9" last revised on "11/16/2022", revealed " ...Misappropriation of resident property is the deliberate misplacement, exploitation, or wrongful, temporary, permanent use of a resident's belongings or money without the resident's consent. Employee' Misappropriation includes but is not limited to ... Theft of money from bank accounts, unauthorized or coerced purchases on a resident's credit card..." Record review of the "Verification of Investigation" with a date/time of occurrence of 04/14/2023 at 4:00 PM revealed, "Resident presented banking information to nurse supervisor on 4/17/23 at approximately 6:40 PM showing an unauthorized transaction to employed CNA, (Proper Name of	M 500	On 4/17/2023 upon notification of Certified Nursing Assistant making an unauthorized transaction from resident's bank account to her account in the amount of $24.00, the Executive Director, Human Resources, and Director of Nursing immediately suspended and terminated employee. The Social Worker initiated education on Abuse, Neglect, Exploitation, and Misappropriation policies and procedures on 4/18/2023. The resident was reimbursed from the facility in the amount of $25.00 on 4/20/2023. All residents have the potential to be affected by this deficient practice. Quality Review was conducted by the Executive Director on preventing misappropriation of resident funds by staff education and interviews with residents and staff. On 6/29/2023 a Root Cause Analysis (RCA) was completed by the Quality Assurance Performance Improvement (QAPI) Committee on ensuring the prevention of misappropriation of funds by staff education and interviews with residents and staff. On 6/16/2023, the Director of Nursing initiated staff training to the policies and procedures that govern resident rights to be free from abuse, neglect, exploitation, and misappropriation	

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M 500	Continued From page 5 CNA), for $25.00 on 4/14/2023. DON (Director of Nurses)/Administrator/Human Resources Director notified. Employee immediately suspended. Investigation initiated ...Resident Interview Summary: I gave her my card. I do not even know her name. I asked her to get me two drinks..." Record review of the "Employee Corrective Action Form" dated 4/17/23 revealed ..."Employee Comments: I went to the vending machine and got (Formal Name of Resident #1) two (2) sprites and afterwards I sat the sprites on his tables because he wasn't in the room. I hacked his card to my cash app and sent myself 205 (25.00)..." Interview on 6/13/23 at 10:30 AM, with the DON revealed that when the CNA #1 was interviewed during the investigation, she did not deny or admit to taking the money out of the resident's account. Interview with the Administrator on 6/13/23 at 3:00 PM, revealed that on 4/20/23 he was shown the picture of Resident #1's account and the evidence that CNA #1 had taken the $25.00 and deposited the money into her own account. Interview on 6/14/23 at 3:05 PM, with the facility's Human Resources staff, she revealed CNA #1 was in the facility when Resident #1 told her that he had given CNA #1 his account information to go to the facility soda machine and get him two (2) soft drinks. She revealed that she immediately went to CNA #1 and began the investigation. She stated that CNA #1 denied taking the money but when she saw the picture of the $25.00 taken from the resident's account and was deposited into her own account, she then admitted to doing it.	M 500	of property. Education was completed on 6/20/2023. Newly hired staff will be educated by the Director of Nursing on the policies and procedures that govern resident rights to be free from abuse, neglect, exploitation, and misappropriation of property. A Quality Assurance Performance Improvement (QAPI) meeting was held on 6/29/2023 to ensure the prevention of misappropriation of funds by staff education and interviews with residents and staff. Executive Director/Director of Nursing will conduct Quality Monitoring initiating on 6/30/2023, five (5) resident interviews per week for two (2) weeks, three (3) resident interviews per week for two (2) weeks, and then three (3) resident interviews per month for six (6) months to ensure the prevention of misappropriation of funds. Staff education will be completed monthly beginning on 6/30/2023 to the policies and procedures that govern resident rights to be free from abuse, neglect, exploitation, and misappropriation of property. On 7/19/2023 we will conduct a QAPI meeting to review our findings from our Quality Monitoring to ensure our solution is sustained. We will review all findings from our Qaulity Monitoring on the third Thursday of each month during the QAPI meeting by the QAPI Committee in the monthly meeting for six (6) months to ensure are solutions are sustained.	

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M 500	Continued From page 6 An interview with CNA #2 on 6/14/23 at 4:23 PM, revealed that Resident #1 came to her on 4/17/23 and gave her his phone to see what was wrong with his account and what was the name of the person who received $25.00 from his account. CNA #2 revealed that when she saw the name of CNA #1, she was shocked, and asked if she could take a picture of the account statement that was on his phone. She then went to the facility Human Resource staff, showed her the picture and told her what Resident #1 said. An interview with the Attorney General investigator on 6/15/23 at 1:30 PM, revealed that he did an interview with CNA #1 and she admitted on a video that she did take the $25.00 from Resident #1's account and deposited it into her own account. Record review of the "Admission Record" revealed Resident # 1 was admitted to the facility on 4/12/23 with diagnoses that included Type 2 Diabetes Mellitus and Heart failure. Record review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 4/24/23 revealed Resident #1 had a Brief Interview for Mental Status (BIMS) score of 15 indicating Resident #1 was cognitively intact.	M 500		