STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255171	A. BUILDING _____ B. WING _____	C 06/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINONA MANOR HEALTH CARE AND REHABILITATION CENTER	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) COMPLETION DATE
F 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 requirements for participation in Medicare and Medicaid. The SA investigated CI MS #21378 for Misappropriation of Property and cited F600. The SA investigated CI MS #21807 for Misappropriation of Property and did not cite any deficiencies. The SA investigated CI MS #21707 for Neglect, 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.	F 000		
F 602 SS=D	Free from Misappropriation/Exploitation CFR(s): 483.12 §483.12 The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's medical symptoms. This REQUIREMENT is not met as evidenced by: 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	F 602	On 4/17/2023 upon notification of Certified Nursing Assistant making an unauthorized transaction from resident's bank account to her account in the	7/24/23

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

Electronically Signed | 06/28/2023

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F 602	Continued From page 1 (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 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	F 602	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 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	

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F 602	Continued From page 2 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. 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.	F 602	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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F 602	Continued From page 3 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.	F 602		