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
	57ME	A. BUILDING: _____ B. WING _____	C 04/17/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COURTYARD REHABILITATION AND HEALTHCARE	501 SOUTH LOCUST STREET MCCOMB, MS 39648

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M 000	Initial Comments The State Agency (SA) conducted three (3) Complaint Investigations (CI MS #24139, CI MS #24246 and CI MS # 24470), at the facility from 4/15/24 to 4/17/24. CI MS #24139 was investigated related to improper behavior of administrative personnel. CI MS #24246 was investigated regarding quality of care, physical environment, and resident abuse and neglect. CI MS # 24470 was investigated regarding neglect of pressure wounds. During the survey, the SA determined the facility was not in compliance with the Minimum Standards for Institutions for the Aged or Infirm, state licensure requirements and cited M610 related to CI MS # 24246. M615 was cited related to CI MS #24470.	M 000		
M 610	45.21.2 Activities of daily living Activities of daily living. Each resident shall receive assistance as needed with activities of daily living to maintain the highest practicable well being. These shall include, but not be limited to: 1. Bath, dressing and grooming; 2. Transfer and ambulate; 3. Good nutrition, personal and oral hygiene; and 4. Toileting. This Statute is not met as evidenced by: Level II Based on observation, interviews, and record reviews, the facility failed to ensure dependent residents received Activites of Daily Living (ADL) care to include oral hygiene for two (2) or six (6) sampled residents. Residents #3 and #6	M 610	1) Root Cause Analysis was conducted on 4/19/2024 and based on findings Resident #3 and Resident #6 were provided oral care and provided with toothbrushes and toothpaste on 4/15/2024 by the Certified Nurse Assistant.	5/22/24

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M 610	Continued From page 1 Findings Include: Record review of the facility's policy and procedure titled, "Activities of Daily Living," dated 2/1/22, revealed, "Policy: To encourage resident choice and participation in activities of daily living (ADL) and provide oversight, cuing and assistance as necessary. ADLs include bathing, dressing, grooming, hygiene, toileting and eating. Procedure: 1. CNA (Certified Nurse Aide) will review the resident Kardex (facility software that includes individualized resident care) for information on individual care needs and preferences ..." Resident #3 In an interview on 4/15/24 at 12:43 PM, Resident #3 revealed that some of his grooming is done by staff, with the exception of assisting him in cleaning his teeth. He added that not having his teeth brushed "irritates" him but he has not brought it up. In an interview on 4/17/24 at 9:05 AM, Resident #3, once again emphasized his desire to brush his teeth every day. He explained that his toothbrush and toothpaste were in his nightstand drawer to his right, but he could not reach over to retrieve them. He added that he only needs someone to remove the items from his drawer and place them on the overbed table, as he can brush his own teeth, but staff "have never offered" to help him. Record review of the "Admission Record" revealed Resident #3 was admitted to the facility on 10/16/23. Current diagnoses include Morbid (Severe) Obesity and Muscle Weakness.	M 610	2) Current Residents have the potential to be affected. 3) Education was initiated with licensed nurses and certified nursing assistants on oral hygiene 4/19/2024 by Registered Nurse with emphasis on providing oral hygiene care according to Comprehensive Care Plan an providing toothbrushes and toothpaste to Resident.Education will be completed by 5/10/2024. Oral care will be provided as part of Activities of Daily Living (ADL) personal hygiene. Resident will be provided hygiene products on admit and as needed. Resident will have Comprehensive Care Plan that includes measurable objectives and timetables to meet the residents' medical, nursing, mental and psychosocial needs to include personal hygiene. New Hires will be educated during orientation. 4) Quality Monitoring will be conducted starting 4/19/2024 by Director of Clinical Services or Registered Nurse by observation and audit of Activities of Daily Living (ADL) records twice weekly x 4 weeks then weekly for 2 months to ensure Residents have toothbrushes, toothpaste and oral care provided. Findings will be reported to QAPI Committee starting 5/19/2024 then monthly for 3 months.	

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M 610	Continued From page 2 Record review of the Quarterly Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 2/22/24 revealed a Brief Interview for Mental Status (BIMS) score of 15, which indicated Resident #3 was cognitively intact. Resident #6 During an interview on 4/15/24 at 2:11 PM, Resident #6 revealed he had not received oral care since arriving at the facility in September 2023. He stated staff members promised him a toothbrush and toothpaste last week, but it has yet to arrive. On 4/16/24 at 12:53 PM, Resident #6 stated in an interview that the CNAs had never approached him about oral care or offered to provide him a toothbrush or toothpaste to brush his own teeth. He denied ever declining this kind of care. He added that he wants to brush his teeth every day. A record review of the Admission Record for Resident #6 revealed the facility admitted the resident on 9/28/23. Current diagnoses include Lack of Coordination, Stiffness of Joints, and Hemiplegia and Hemiparesis Affecting Right Non-Dominant Side. A record review of the Quarterly MDS, for Resident #6, with ARD of 4/3/24 revealed a BIMS score of 15, indicating the resident was cognitively intact. During an interview with the Interim Director of Nurses (IDON) on 4/16/24 at 11:35 AM, she revealed that residents should have the choice of brushing their teeth daily. The Certified Nursing Assistants (CNAs) should do it or let the residents	M 610		

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M 610	Continued From page 3 do it themselves. She points out that it is the role of the CNAs to help provide toothbrushes and other dental hygiene supplies. On 4/17/24, during an interview with CNA #1, she stated that she is occasionally assigned to care for Resident #6. She revealed that this resident has limited mobility and should be assisted with grooming tasks, such as brushing his teeth. She confirmed that the resident should be assisted in cleaning his teeth on a daily basis, as this is part of the grooming process for which CNAs are accountable. During a telephone interview on 4/18/24 at 10:33 AM, with the Administrator, she revealed she expects the CNAs to provide "top to bottom" care for residents as needed. The CNAs are to follow their task list when doing care. This means taking care of their hair, nails, and teeth, she wants it all done.	M 610		
M 615	45.21.3 Pressure sores Pressure sores. Residents with a pressure sore shall receive necessary treatment and service to promote healing and prevent the development of new pressure sores. Residents without pressure sores will not develop pressure sores unless the residents' clinical condition indicates they were unavoidable. This Statute is not met as evidenced by: Level II Based on observation, interviews, record review, and policy review, the facility staff failed to provide treatment and services in a manner to promote the healing and prevent complications of a	M 615	1) Root Cause Analysis was conducted on 4/19/2024 and based on findings Resident #5 was provided wound care following the physician orders on 4/16/2024 by Licensed Nurse.	5/22/24

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M 615	Continued From page 4 pressure ulcer for one (1) of four (4) sampled residents with pressure ulcers. Resident #5 Findings include: Review of the facility's policy titled, "Skin and Wound," revised 1/24/2, revealed, "Policy: To provide a system for identifying risk, and implementing resident centered interventions to promote skin health, prevention, and healing of pressure injuries ... Process: Pressure Injury Prevention ... 3. Nurse is to complete skin evaluation weekly and prior to transfer/discharge and document in the medical record ... Skin Impairment Identification: 1. Document presence of skin impairment(s)/ new skin impairment(s) when observed and weekly until resolved. 2. Nurse to report changes in skin integrity to physician/physician extender, resident/resident representative and document in the medical record ... On-going Evaluation 1. Evaluate the effectiveness of interventions, and progress towards goals during the standard of care and the care plan meetings ...." On 4/16/24 at 8:43 AM, an interview the Interim Director of Nursing (IDON) stated they have not had a wound care nurse for two weeks, as the wound care nurse resigned. She revealed a Nurse Practitioner (NP) comes on Wednesday and measures the pressure and vascular wounds. The facility has all her assessments uploaded to the resident's computerized chart by the following Monday, so the staff can have access to them. The IDON stated she expects staff to do wound care and chart the care in the resident's chart. On 04/16/24 at 3:45 PM, an observation of wound care for Resident #5 revealed while performing	M 615	2) Residents with physician orders for wound care has the potential to be affected. 3) Education with Licensed Nurses conducted on 4/19/2024 by Director of Clinical Services or Registered Nurse on following physician orders when providing wound care. Demonstration and return demonstration competency on providing wound care was conducted with Licensed Nurse on 4/22/2024 by Director of Clinical Services. Residents will have physician orders for wound care and orders will be followed when providing wound care to ensure treatment and services are provided in a manner to promote healing and prevent complications of pressure ulcer. New hires will be educated in orientation. 4) Quality Monitoring will be conducted starting 4/18/2024 by Director of Clinical Services or Registered Nurse twice weekly x 4 weeks the weekly for 2 months to ensure wound care orders are followed when wound care is provided to ensure treatment and services are provided in a manner to promote healing and prevent complications. Findings will be reported to QAPI Committee starting 5/19/2024 then monthly times 3 months.	

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M 615	Continued From page 5 wound care to the resident's sacral wound, Licensed Practical Nurse (LPN) #1 did not apply the Dakins moist dressing to the wound bed prior to covering the wound with foam border gauze. Record review of the "Order Summary Report," with active orders as of 4/17/24 revealed an order dated 2/9/24 "Wound Care: Clean unstageable pressure wound to Sacrum, with full strength Dakins, Place Dakins moist gauze to wound bed, cover with foam brooder (boarder) gauze every day shift ..." On 4/16/24 at 4:28 PM, in an interview regarding the wound care, of Resident #5, Licensed Practical Nurse (LPN) #1 confirmed that she did not apply the Dakins moist gauge to the wound bed prior to covering the wound with the border gauze. The nurse stated the physician's orders for wound care are written to aid in the healing of the wound and should be followed. On 4/16/24 at 4:40 PM, in an interview with the IDON, she confirmed that LPN #1 should have followed physician orders, as the moist dressing aids in healing the wound. The IDON added that by not following the physician's orders, there is a possibility the wound could get worse. Review of the "Admission Record," revealed Resident #5 was admitted to the facility on 8/9/21.Current diagnoses include Alzheimer's Disease, Type 1 Diabetes Mellitus, and Atherosclerotic Heart Disease.	M 615		