

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 265452	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/28/2024
NAME OF PROVIDER OR SUPPLIER MT Vernon Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 1425 South Landrum Mount Vernon, MO 65712	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Keep residents' personal and medical records private and confidential.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 37358</p> <p>Based on observation, interview, and record review, the facility failed to ensure each resident's personal privacy was protected when a staff member (Certified Nurse Aide (CNA) A) posted a video to social media for public view that included one resident (Resident #1), of four sampled residents, without the resident or resident's responsible party's permission. The facility census was 45.</p> <p>On 08/19/24, the Administrator was notified by facility staff of the Past Non-Compliance that occurred on 08/19/24. The Administrator and Director of Nursing immediately began an investigation that included review the videos and interviews with residents and staff. The facility began inservice education with all staff on 08/19/24 regarding phone use and protecting resident privacy. The noncompliance was corrected on 08/20/24.</p> <p>Review of the facility's policy titled Employment Acknowledgement of Guidelines to Personal Social Networking, dated October 2011, showed the following information:</p> <ul style="list-style-type: none"> -Social media must maintain resident, employee, and company confidentiality; -Posting pictures or any other information capable of identifying residents is prohibited. <p>1. Review of Resident #1's face sheet showed the following information:</p> <ul style="list-style-type: none"> -admitted [DATE]; -Diagnoses included traumatic brain injury (TBI), unspecified dementia with behaviors, and anxiety disorder. <p>Review of the resident's quarterly Minimum Data Sheet (MDS - a federally mandated assessment tool filled out by facility staff), dated 06/25/24, showed the following information:</p> <ul style="list-style-type: none"> -Severe cognitive impairment; -Able to communicate to make needs known, but difficult to understand; -Dependent on staff for all personal cares and mobility. <p>Review of the resident's care plan, created on 08/31/24, showed the following:</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0583</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 08/28/24, at approximately 12:25 P.M., Licensed Practical Nurse (LPN) F said the following:</p> <ul style="list-style-type: none"> -He/she was shown the video posted by CNA A by another staff member; -He/she said they did look and those were the only two videos posted by CNA A; -Anyone who has visited the facility could possibly recognize the resident; -The resident's privacy was violated and if it were his/her own family member, they would be extremely upset about it; -He/she was not sure what CNA A said in the video. <p>During an interview on 08/28/24, at approximately 1:20 P.M., LPN H said the following:</p> <ul style="list-style-type: none"> -He/she was shown the video and was very upset after seeing it; -He/she felt very bad for the resident; -He/she was not able to say what was said aloud on the video, but said he/she definitely could tell it was the resident; -He/she said that the resident's privacy was not protected that evening; -He/she said they know they would be very upset if it were her being filmed in their own home. <p>During an interview on 08/28/24, at approximately 1:40 P.M., Registered Nurse (RN) I said the following:</p> <ul style="list-style-type: none"> -He/she did see the video and said they could easily identify the resident; -He/she did look to see if there were any posted prior and that there were none; -This is a violation of the resident's right to privacy. <p>During an interview on 08/28/24, at approximately 2:15 P.M., the DON, said the following:</p> <ul style="list-style-type: none"> -Two staff brought the video to the Administrator's attention first; -He/she and the Administrator then both reviewed the videos; -The first video showed CNA A rolling down the hall in the memory unit; -As CNA A goes down the hall, the resident is in the background; -It is a side view, but they all are aware of who the resident is; <p>(continued on next page)</p>		

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