

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255218	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/30/2025
NAME OF PROVIDER OR SUPPLIER Tishomingo Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 230 Khaki Street Iuka, MS 38852	
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)		
F 0550 Level of Harm - Actual harm Residents Affected - Some	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, resident and staff interviews, record review, and a review of facility policy, the facility failed to ensure residents were treated with dignity and respect by providing adequate incontinent care supplies during the night shift for four (4) of five (5) residents sampled. Resident #1, #2, #3, and #4. Findings Include: Record review of the facility policy titled Resident's Rights Policy with a revision date of 12/23 revealed Every resident in this facility has the right to: 11. Receive adequate and appropriate health care, medical treatment and protective support services. 12. Be treated courteously, fairly, and with the fullest measure of dignity. Record review of the facility policy titled Dignity and Respect with a revision date of 07/22 revealed, A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life recognizing each resident's individuality. The facility shall protect and promote the rights of the resident. 3. All residents should have autonomy of choice, to the maximum extent possible, about how they wish to live their everyday lives and receive care. On 12/30/2025 at 5:15 AM, Licensed Practical Nurse (LPN) #1 revealed we don't have access to the resident's incontinent briefs. If our residents run out of briefs, they tell the aides to bridge them, which is a pad underneath them and a couple of sheets, which is folded over them in the front and folded between their legs. She revealed that if they urinate or have a bowel movement, they will have it in the pad and the sheet. She revealed that many residents don't like that, especially the A hall residents, who are here for therapy. An interview on 12/30/2025 at 5:25 AM with Certified Nurse Aide (CNA) #1 revealed that we don't have access to the briefs if needed. The residents are given a certain amount of incontinence briefs in the morning and if they run out before the day is over then they have to wear a bed sheet. During an interview on 12/30/2025 at 5:30 AM, LPN #2 revealed that housekeeping passes out the briefs in the mornings. She revealed that a key is kept in the medication room, and the nurses will unlock the environmental room and retrieve the briefs for the aides. An observation of the environmental room alongside LPN #1 and LPN #2 revealed that no incontinent briefs were available in the locked room. In an interview on 12/30/25 at 5:35 AM, CNA #2 revealed it has been a big issue with not having briefs when we come on shift and we have complained about it. She revealed we have been told that we have to bridge the residents, we have to use a draw pad under them and then put a bedsheet between their legs and sheets across them. She revealed that if they have to urinate or have a bowel movement, they do it in those. She revealed that not all residents like that, and that Resident #4 has voiced her dislike, but there's not much we can do about it. She revealed that housekeeping comes in in the mornings and passes out the wipes and briefs for the whole day and night and if they run out then we don't have access to anymore. During an interview on 12/30/25 at 5:45 AM, laundry worker revealed that she passes the incontinent briefs and follows a list of residents' sizes provided by her housekeeping supervisor. She revealed we pass</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: 255218	Facility ID: 255218 If continuation sheet Page 1 of 3

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F 0550 Level of Harm - Actual harm Residents Affected - Some	<p>out six (6) briefs to the residents who are incontinent for a 24-hour period. In an interview on 12/30/25 at 5:50 AM, CNA #3 revealed there is a major shortage of briefs on the 11pm-7am shift. She revealed she used to work on the day shift, and it was nothing like this. We are told on night shift to Bridge the resident's meaning by putting a pad under them and a sheet over them when we run out of briefs. An interview on 12/30/25 at 6:05 AM, Housekeeper #1 stated that she Passes out briefs in the morning, and every resident gets 6 for the whole day and night and I personally didn't think that would be enough to last them, but that is what we're instructed to do. Everybody gets 6. During an interview on 12/30/25 at 8:05 AM, the Housekeeping Supervisor revealed that she is also a CNA but has been in the housekeeping supervisor role for about two (2) years. She revealed that they put out a certain number of adults briefs each morning, some residents get 6, some get eight (8), and some get 10. She revealed that when I took over this job, this was the way it was done. I don't fully understand it, but I do what the Director of Nursing (DON) has told me to do. I have questioned it in the past and was told that they wanted to Bridge the residents. She confirmed that the CNA's do not have access to the briefs, but that a key is hanging up in the medication room, and the nurse can go into the locked environmental room and get some extra briefs that she leaves for them. The Housekeeping Supervisor confirmed that there were not any extra briefs in the locked room this morning. In an interview on 12/30/25 at 10:35 AM, the DON confirmed that Resident #4 was incontinent, and she preferred to wear briefs. The DON stated, They have plenty of briefs at night, and they can access the environmental room for any additional supplies that they need although we try to do 'open air' during night shift, it's where we don't put briefs on them and just let them air out. She revealed all of our non-cognitive residents; we don't put on briefs at night. She revealed that she had never asked the residents what their preferences were and further confirmed that there were not any briefs this morning in the locked environmental room that the staff could access briefs for the incontinent residents. Resident #1 An observation on 12/30/25 at 7:30 AM revealed Resident #1 lying in bed with only a shirt on, and his lower extremities from the waist down are exposed with just a white sheet lying across his lower abdomen and private area. An observation and interview on 12/30/25 at 7:35 AM, CNA #4 confirmed that Resident #1 was lying in bed with a sheet across his private area and no incontinent brief on. She revealed that the brief situation has been very interesting here. They are given a certain amount in the morning, and it has to last them through the next morning. She revealed it has really made it hard on us aides and we don't like it. Record review of the admission Record revealed Resident #1 was admitted to the facility on [DATE] with medical diagnoses that included Hypertensive Heart Disease and Peripheral Vascular Disease. Record review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 10/14/25, revealed under section C, a Brief Interview for Mental Status (BIMS) summary score of 6, indicating Resident #1 is severely cognitively impaired. Section H- Bladder and Bowel revealed that Resident #1 is Frequently Incontinent of Urinary and Bowel Continence. Resident #2 During an interview on 12/30/25 at 7:50 AM, Resident #2 revealed they had run out of diapers at night. She stated, They didn't ask if it would be okay with me not wearing one; they just took it upon themselves to put a sheet on me. I didn't say anything about it because I didn't feel like I had a say in what they were doing. I thought it strange, and I don't like it at all, but I have to go with what they do. Record review of the admission Record revealed Resident #2 was admitted to the facility on [DATE] with medical diagnoses that included Chronic Obstructive Pulmonary Disease, Diastolic Congestive Heart Failure, and Hereditary and Idiopathic Neuropathy. Record review of the MDS with an ARD of 12/1/25, revealed under section C, a BIMS summary score of 11, indicating Resident #2 is moderately cognitively impaired. Section H- Bladder and Bowel revealed that Resident #2 has an</p> <p>(continued on next page)</p>		

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