

Survey Deficiency Summary

15 Facilities Surveyed

Surveys Taken 11/1/18-12/17/18

E006 Plan Based on All Hazards Risk Assessment

- C Facility failed to develop and maintain an emergency preparedness plan that must be reviewed and updated at least annually.

F550 Resident Rights/Exercise of Rights

- E Facility failed to ensure that patients were treated with dignity and respect as evidenced by four patients not receiving their meal tray timely with the other patients seated at their table in the dining room. One CNA referred to one patient as a feeder and an indwelling Foley catheter drainage bag was uncovered.

F558 Reasonable Accommodations of Needs/Preferences

- D Facility failed to answer a call light in a timely manner for one patient.

F580 Notify of Changes (Injury/Decline/Room, Etc.)

- D Facility failed to report a change in patient condition timely to the physician for one patient.

F600 Free from Abuse and Neglect

- D Facility failed to prevent abuse for one patient. One patient struck another patient as she walked down the hall.

F623 Notice Requirements Before Transfer/Discharge

- D Facility failed to provide notice to the Ombudsman of transfers for two patients.
- D Facility failed to notify the Ombudsman of emergency transfers for two patients.

F637 Comprehensive Assessment After Significant Change

- D Facility failed to complete a significant change MDS for one patient.

F641 Accuracy of Assessments

- E Facility failed to accurately assess patients for urinary catheters, PEG tube, fall and discharge disposition for five patients.
- D Facility failed to ensure the MDS was accurate for one patient.

F644 Coordination of PASARR and Assessments

- E Facility failed to resubmit a PASRR level 1 after new psychiatric diagnoses for two patients reviewed for a level 2.

18-Jan-19

F656 Develop/Implement Comprehensive Care Plan

- D Facility failed to develop and implement a comprehensive care plan to include care of a concussion after a fall for one patient.
- D Facility failed to develop a comprehensive nutritional care plan after weight loss for one patient.

F657 Care Plan Timing and Revision

- D Facility failed to revise a care plan for fall risk and skin integrity following a fall with a laceration for one patient.

F684 Quality of Care

- D Facility failed to ensure each patient was repositioned to promote comfort and provide pressure relief for one patient.
- D Facility failed to follow hospital discharge instructions following a fall for one patient.

F686 Treatment/Svcs to Prevent/Heal Pressure Ulcers

- D Facility failed to provide care and services for the treatment of pressure ulcers when pressure injury treatments were not documented for two patients.
- D Facility failed to maintain infection control practices during a dressing change for one patient.

F692 Nutrition/Hydration Status Maintenance

- D Facility failed to ensure nutritional interventions were provided to prevent further weight loss for two patients.

F695 Respiratory/Tracheostomy care and Suctioning

- D Facility failed to provide respiratory care to address one patient's decline in respiratory status.
- D Facility failed to provide oxygen therapy in a sanitary manner for one patient. The facility did not follow their policy that stated the tubing would be changed every seven days.

F756 Drug Regimen Review, Report Irregular, Act on

- D Facility failed to act timely on pharmacy recommendations for two patients.

F760 Residents Are Free of Significant Med Errors

- D Facility failed to ensure one RN administered medications free of significant medication errors. The nurse administered a fast-acting insulin but did not ensure the patient received food in a timely manner. The patient waited an hour before supper was delivered.
- D Facility failed to ensure patients were free of significant medication errors when one LPN failed to ensure insulin was administered correctly in correlation to meals.

F761 Label/Store Drugs & Biologists

- D Facility failed to follow established procedures for narcotic drug reconciliation counts on one medication cart.

F812 Food Procurement Store/Prepare/Serve - Sanitary

- F Facility failed to properly clean and store kitchen equipment in the dietary department kitchen; failed to remove expired food products, date and label patient food products and to separate patient and staff food products in two of the nourishment rooms; and failed to properly store food items in one patient room.
- E Facility failed to serve chicken at an acceptable holding temperature and to ensure the microwave was clean for two days.
- E Facility failed to ensure expired food was not available for patient use in one kitchen refrigerator.
- D Facility failed to ensure that food was stored under sanitary conditions as evidenced by temperatures that exceeded the required safe operating temperature and temperatures were not checked daily in one nourishment refrigerator.
- D Facility staff failed to serve food under sanitary conditions during dining observations and the facility failed to ensure enteral feedings were stored under sanitary conditions as evidenced by nine enteral feedings were stored past the use by date in one nourishment room.
Facility failed to ensure food and ice were stored, prepared and served under sanitary conditions when the walk in refrigerator and machine were dirty and food was unlabeled and undated.

F842 Resident Records - Identifiable Information

- D Facility failed to document significant changes in patient medical conditions into the medical record for one patient.

F880 Infection Prevention & Control

- E Facility nurse failed to perform proper hand hygiene and failed to cleanse the stethoscope during tracheostomy care, and two nurses failed to perform proper hand hygiene during wound care.
- D Facility failed to ensure practices to prevent the potential spread of infection were maintained by two LPNs administering medications who failed to perform hand hygiene and failed to change the enteral tubing when it was contaminated.
- D Facility failed to ensure practices to prevent the development and transmission of infection when one staff member handled food with bare hands during two meal observations.
- D Facility failed to ensure practices to prevent the potential spread of infection were followed when one LPN failed to perform hand hygiene or wear gloves during a blood glucose test, and failed to discard a used glucometer strip in the biohazard waste.

K222 NFPA 101 Egress Doors

- D Facility failed to maintain the egress doors. The hardware did not release during a fire alarm testing.
- D Facility failed to maintain the delayed egress doors. They were not releasing within 15 seconds.

K281 Illumination of Means of Egress

- D Facility failed to maintain illumination at the exit discharges.

K311 Vertical Openings - Enclosure

- F Facility failed to maintain the fire resistance rating of the exit stairwell.

K324 Cooking Facilities

- D Facility failed to maintain fire protection in the kitchen.
- D Facility failed to protect the cooking equipment. The deep fryer in the kitchen was not centered under the hood fire suppression system.

K353 Sprinkler System; Testing and Maintenance

- D Facility failed to maintain the sprinkler system. There were corroded sprinkler heads in the facility.
- D Facility failed to maintain the sprinkler system. There was a build up of lint on several sprinkler heads.
- D Facility failed to maintain the sprinkler system. There were sprinklers loaded with lint.
- D Facility failed to maintain the automatic sprinkler system. The fire department connection did not have the required signage.
Facility failed to maintain the fire sprinkler system. There were corroded sprinklers in the facility.

K363 Corridor - Doors

- D Facility failed to maintain the corridor doors. Some of the doors would not close to a positive latch.

K511 Utilities - Gas and Electric

- D Facility failed to maintain the electrical wiring. There was an open electrical junction box with wiring exposed in the laundry.
Facility failed to maintain the electrical systems.

K711 Evacuation and Relocation Plan

- D Facility failed to ensure staff was trained so they are familiar with procedures in a kitchen fire.
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K781 Portable Space Heaters

- D Facility failed to prohibit space heaters above 212 degrees Fahrenheit.
- D Facility failed to prohibit space heaters over 212 degrees Fahrenheit. Four were being used in offices.

K914 Electrical System; Maintenance and Testing

- D Facility failed to maintain the electrical systems. The annual tension test on all patient rooms electrical receptacles had not been done.

K918 Electrical Systems - Essential Electric System Maintenance and Testing

- D Facility failed to maintain the emergency generator. The annual load bank testing of the emergency generator had not been conducted since 2017.

K920 Electrical Equipment; Power Cords and Extension Cords

- E Facility failed to maintain electrical equipment. There were two extension cords in use in the Unit Manager Office.
- D Facility failed to prohibit extension cords. There was an extension cord in use in the chapel.

K921 Electrical Equipment; Testing and Maintenance

- F Facility failed to establish policy and protocols for the physical integrity, resistance, leakage current, and touch current tests for fixed and portable patient care related equipment that indicates the tests, repairs, and modifications that are in accordance with service manuals, instructions, and procedures provided by the manufacturer.
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N1410 Disaster Preparedness; Fire Safety Procedures Plan

Facility failed to conduct the annual required earthquake drill.

Facility failed to conduct the required disaster drills annually prior to March.

Facility failed to maintain the physical plant. There were multiple penetrations in the fire wall.

N629 Infection Control; Disinfect Contaminated Items

Facility failed to ensure practices to prevent the potential spread of infection were followed when one LPN failed to cleanse the stethoscope during tracheostomy care.

N766 Food and Dietetic Services; Freezer Temperature

Facility failed to ensure food and ice were stored, prepared and served under sanitary conditions when the walk in refrigerator and machine were dirty and food was unlabeled and undated. This was a type C pending penalty.

Facility failed to ensure practices to prevent the development and transmission of infection when one staff member handled food with bare hands during two meal observations.

Facility staff failed to serve food under sanitary conditions during dining observations and the facility failed to ensure enteral feedings were stored under sanitary conditions as evidenced by nine enteral feedings were stored past the use by date in one nourishment room. This was a type C pending penalty.

N768 Basic Services; Social Work Services

Facility failed to serve chicken at an acceptable holding temperature. This was a type C pending penalty.

N775 Food and Dietetic Services; Thermometers in Freezers/Refrigerators

Facility failed to ensure that food was stored under sanitary conditions as evidenced by temperatures that exceeded the required safe operating temperature and temperatures were not checked daily in two nourishment refrigerators.

N831 Building Standards

Facility failed to maintain the physical plant. There were penetrations in the fire wall.

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N835 Building Standards; Approval of New Construction

Facility failed to obtain prior approval from the Department of Health before changing the use of an area.

Facility failed to obtain approval from the TN Department of Health before making major alterations.

Facility failed to get prior written approval from the Tennessee Department of Health before making alterations to the facility.

N848 Building Standards; Exhaust & Air Pressure

Facility failed to maintain negative air pressure in soiled areas. The janitor closet exhaust fan was not working.