

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1701	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/26/2014
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NAME OF PROVIDER OR SUPPLIER BELLS NURSING AND REHABILITATION CENT	STREET ADDRESS, CITY, STATE, ZIP CODE 213 HERNDON DRIVE BELLS, TN 38006
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(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) COMPLETE DATE
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N 765	<p>1200-8-6-.06(9)(i) Basic Services</p> <p>(9) Food and Dietetic Services.</p> <p>(i) Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination whether in storage or while being prepared and served and/or transported through hallways.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #22</p> <p>Tennessee Code Annotated 68-11-804(c)22: Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination, whether in storage or while being prepared and served and/or transported through hallways.</p> <p>Based on policy review, observation and interview, it was determined the facility failed to ensure food was served under sanitary conditions as evidenced by 1 of 32 (Staff Member #1) staff members observed assisting residents during 1 of 2 (lunch meal 8/29/14) dining observations, failed to practice proper hand hygiene.</p> <p>The findings included:</p> <p>Review of the facility's "Tray Identification and Tray Pass" policy documented, "...Policy Statement... The purpose of this policy is to ensure that trays are passed to residents in an appropriate manner... Policy Interpretation and Implementation ...4. Staff helping with tray pass should perform proper hand hygiene..."</p> <p>Observations in the dining room on 8/25/14 at 11:10 AM, revealed staff member #1 served a</p>	N 765	<p>N765</p> <p>1200-8-6-.06(9)(i) BASIC SERVICES</p> <p>Requirement:</p> <p>Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination whether in storage or while being prepared and served and/or transported through hallways.</p> <p>Corrective Action:</p> <ol style="list-style-type: none"> 1. This facility will ensure that food is served under sanitary conditions. 2. One on one education was provided on 8-26-14 and 8-27-14 to Staff Member #1 (Activity Staff) on proper distribution and serving of food by The Director of Nursing, Assistant Administrator, and Dietary Supervisor. 3. Staff Member #1 received reorientation training on proper hand hygiene practices and serving food under sanitary conditions. Education provided by the Staff Trainer (LPN) and Dietary Supervisor. 4. Demonstration of correct practice of serving food and proper hand hygiene was observed in the dining room on 8-27-14, 8-28-14, 8-29-14 9-2-14, 9-3-14 and 9-4-14 by the Dietary Supervisor during tray pass. <p>RECEIVED SEP 08 2014</p>	
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Division of Health Care Facilities
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Craig B. Laman

TITLE

ADM.

(X6) DATE

9-8-14

Division of Health Care Facilities

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N 765	<p>Continued From page 1</p> <p>tray to Resident #56, as she cut and buttered Resident #56's roll, she touched the roll with her bare hand.</p> <p>During an interview in the activities' office on 8/26/14 at 3:45 PM, the Director of Nursing (DON) was asked about dining and if staff should touch food when serving trays. The DON stated, "They [staff] should not touch the food with their bare hands."</p>	N 765	<p>5. Entire nursing staff (RNs, LPNs and CNAs) and the activity staff were in-serviced by the Director of Nursing on 8-29-14 on proper technique of serving food to residents and proper hand hygiene techniques.</p> <p>6. Observation of all staff members responsible for tray pass or serving food to a resident will demonstrate understanding and perform correct practice of hand hygiene and serving food to residents with 100% accuracy. Education and performance evaluations will be completed by staff educator and/or Director of Nursing or her designee. When 100% compliance is met observation will be reduced to 50% of staff for 1 week. If compliance is 100% then staff observation will be reduced to 25% for 1 week. If compliance is at 100% random staff observation will continue until deemed compliant by the Performance Improvement Committee.</p> <p>7. Audit results will be reported to the Performance Improvement Committee by the Director of Nursing for effectiveness and determination of compliance.</p>	9-8-14
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SEP 08 2014