

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN1920	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/18/2013
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 JAN 10 2014

NAME OF PROVIDER OR SUPPLIER BORDEAUX LONG TERM CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 1414 COUNTY HOSPITAL RD NASHVILLE, TN 37218
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N 727	<p>1200-8-6-.06(6)(b) Basic Services</p> <p>(6) Pharmaceutical Services.</p> <p>(b) All internal and external medications and preparations intended for human use shall be stored separately. They shall be properly stored in medicine compartments, including cabinets on wheels, or drug rooms.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #7</p> <p>Tennessee Code Annotated 68-11-804(c)7: All internal and external medications and preparations intended for human use shall be stored separately. They shall be properly stored in medicine compartments, including cabinets on wheels, or drug rooms. Such cabinets or drug rooms shall be kept securely locked when not in use, and the key must be in the possession of the supervising nurse or other authorized persons then on duty.</p> <p>Based on policy review, observation and interview, it was determined the facility failed to ensure medications were stored properly as evidenced by a Heparin syringe laying on top of a medication cart, internal medications stored with external medications and disinfectant wipes and medications not dated when opened in 3 of 26 (Birmingham 2 south hall medication cart, Birmingham 3 north hall medication cart and Birmingham 2 north medication cart) medication storage areas.</p> <p>The findings included:</p> <p>1. Review on the facility's medication storage policy documented, "...C. Orally administered medications are kept separate from externally</p>	N 727	<p>N727</p> <p>A. Nurses will be educated on the importance of supervising medications at all times and preparing medications at the time they are intended to be administered. Also, nurses will be educated on dating all medications upon opening and the proper organization of the medication care (i.e., separating internal medications from external medications). All disinfectants are to be stored in a locked area away from medications (is referenced by attachment "Medication Cart Review") (See Attachment EE)</p> <p>B. While on the units, the pharmacy consultant will observe that the above practices are in place. The Director of Nursing will be notified if any deficiencies are found.</p> <p>C. The PCMs will be responsible for a thorough weekly audit of all carts on their unit. The pharmacy consultant will also review carts on a weekly basis.</p> <p>D. The Pharmacy Consultant will review carts and standards of practice (pertaining to medication storage) on a weekly basis. The Director of Nursing will be notified of any deficiencies.</p>	1/18/14
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Division of Health Care Facilities LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Administrator	(X6) DATE 1/19/14
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N 727	<p>Continued From page 1</p> <p>used medications, such as suppositories, liquids, and lotions... F. Except for those requiring refrigeration, medications intended for internal use are stored in medication cart... H. Potentially harmful substances (such as... disinfectants)... stored in a locked area separately from medications..."</p> <p>2. Observations on Birmingham 2 south hall on 12/17/13 at 11:39 AM, revealed a 1 milliliter syringe of Heparin laying on top of the Birmingham 2 medication cart unattended and out of the nurses' view.</p> <p>During an interview on Birmingham 2 south hall on 12/17/13 at 11:39 AM, Nurse #1 was asked what was in the syringe and what should have been done concerning the syringe of Heparin laying on the medication cart. Nurse #1 stated, "...Heparin... should have drawn it up when ready to take the rest of the medicines in [to the resident]..."</p> <p>During an interview in the Birmingham 2 nurse manager's office on 12/17/13 at 12:08 PM, Nurse #2 was asked what should the nurse have done with the syringe left laying on the medication cart unattended. Nurse #2 stated, "...Would have expected [Nurse #1] to put it back in the cart and lock it up..."</p> <p>During an interview in the Director of Nursing's (DON) office on 12/18/13 at 5:20 PM, the DON was asked where would she expect Heparin injection to be stored. The DON stated, "...in the med [medication] cart..."</p> <p>3. Observations on Birmingham 3 north hall on 12/17/13 at 2:20 PM, revealed the Birmingham 3 north hall medication cart had packaged</p>	N 727		
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N 727	<p>Continued From page 2</p> <p>Ibuprofen tablets stored in a box with antibiotic ointment packets, an unlabeled suppository stored with Acetaminophen tablets, 4 containers of Sani-Hands wipes stored in a drawer with liquid medications.</p> <p>During an interview on the Birmingham 3 north hall on 12/17/13 at 2:35 PM, Nurse #4 stated in regards to the Sani-Hands wipes "...they're not open..."</p> <p>During an interview in the Director of Nursing's (DON) office on 12/18/13 at 5:20 PM, the DON was asked where would she expect Heparin injection to be stored. The DON stated, "...in the med [medication] cart..."</p> <p>4. Observations on the Birmingham 2 north hall on 12/17/13 at 2:45 PM, revealed the Birmingham 3 north hall medication cart contained Pyrazinamide and Vasolex ointments that were not dated when opened.</p> <p>During an interview on Birmingham 2 north hall on 12/17/13 at 2:55 PM, Nurse #5 was asked if the medication should be dated when opened. Nurse #5 stated, "...I would assume so, everything that has been opened would need a date..."</p> <p>During an interview in the DON's office on 12/18/13 at 5:20 PM, the DON was asked if multiple dose medications should be dated when opened. The DON stated, "...would expect it to be dated..."</p>	N 727		
N 767	1200-8-6-.06(9)(i) Basic Services	N 767		
	(9) Food and Dietetic Services.			

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N 767	Continued From page 3 (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. This Rule is not met as evidenced by: Type C Pending Penalty #22 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. Based on policy review, observation and interview, it was determined the facility failed to ensure food was not stored past the expiration date and failed to ensure food was dated when opened on 1 of 3 (12/16/2013) days of the survey. The findings included: Review of the facility's food storage policy documented, "...It is our policy to prepare and store food that is stored in accordance with federal, state, and local sanitary codes... Procedure... 2. Refrigerator... d. Raw meats, poultry, and fish will be wrapped labeled, and dated... f. Milk will be rotated with each delivery... Milk with the earliest expiration date will be used first... 4... a. All leftovers will be properly sealed... labeled, and dated..."	N 767	N767 A. December 17, 2013 and December 18, 2013 the Director of Food and Nutrition and the Dietary Manager inspected all department food storage areas to assure all foods were Covered, Dated and Labeled (CDL) and within expiration date. December 23, 2013 all dietary supervisors were instructed on F-tag 371, including information on Cover, Date and Label (CDL) and First In First Out (FIFO). (See Attachment X) December 26, 2013 dairy company contacted by Dietary Manager to establish an understanding on rotation of all dairy products and establish an area in the dairy cooler "Do Not Use Expired" to identify products that are to be returned for credit. January 2, 2014 additions made to DLT rounds guide to increase the number of inspections of CDL. January 8, 2014 dairy company sent letter to confirm expectations on delivery and rotation of product. (See Attachment Y) B. The dietary policies on Food Storage and on Receiving Food were updated to reflect FIFO and CDL. (See Attachment Z)	1/18/14
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N 767	<p>Continued From page 4</p> <p>Observations in the kitchen on 12/16/13 at 11:15 AM revealed the following:</p> <p>a. Dairy cooler had two eight ounce cartons of fat free milk and a gallon of buttermilk stored past the expiration date of 12/13/13.</p> <p>b. Dairy cooler had a quart of heavy whipping cream with a manufacturer's use-by date of 12/15/13 with a hand-written label stating, "Use by 11/23/13."</p> <p>c. Meat cooler had an opened container of chicken bacon with no date when it was opened.</p> <p>d. Produce cooler had an opened, undated container of pimento and cheese spread that was not dated when it was opened.</p> <p>During an interview in the kitchen on 12/16/13 at 11:15 AM, the Registered Dietician (RD) was asked about the opened and undated container of chicken bacon. The RD stated, "I'll throw that away."</p> <p>During an interview in the kitchen on 12/17/13 at 9:45 AM, the Dietary Manager (DM) was asked about the expired milk products. The DM stated, "We use a crate specifically for outdated milk in the dairy cooler, so it can be returned to the vendor for credit." These items were not in the expired crate. The DM was asked if these items got missed. The DM stated, "Yes."</p>	N 767	<p>C. By January 17, 2014 all dietary personnel will be required to complete in-service training on the updated Food Storage and Receiving Food policies with return demonstration on rotating stock and CDL. (See Attachment Z)</p> <p>Learning objectives:</p> <ul style="list-style-type: none"> • Understand proper cover, date and label procedures for food storage • Understand proper rotation of stock to assure food safety, FIFO <p>D. The Director of Food and Nutrition, Dietary Manager, Dietitians, and Dietary Supervisors will audit all food storage areas for proper rotation of stock and CDL four times a week for at least three (3) months to ensure policies concerning FIFO and CDL are properly implemented. Audit results will be reported monthly in Quality Council Committee.</p> <p>The threshold for compliance for the Quality Improvement process will be set at 95%. Once threshold has been met for three (3) consecutive months, audits will be conducted at the discretion of the Director of Food and Nutrition, the Dietary Manager or the Director of Quality/Risk Management.</p>	1/18/14
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