

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  TN2708	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  03/27/2012
NAME OF PROVIDER OR SUPPLIER  BAILEY PARK CLC		STREET ADDRESS, CITY, STATE, ZIP CODE 2400 MITCHELL STREET HUMBOLDT, TN 38343	
(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)
N 629	<p>1200-8-6-.06(3)(b)8. Basic Services</p> <p>(3) Infection Control.</p> <p>8. Water pitchers, glasses, thermometers, emesis basins, douche apparatus, enema apparatus, urinals, mouthwash cups, bedpans and similar items of equipment coming into intimate contact with residents shall be disinfected or sterilized after each use unless individual equipment for each is provided and then sterilized or disinfected between residents and as often as necessary to maintain them in a clean and sanitary condition. Single use, resident disposable items are acceptable but shall not be reused.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #31</p> <p>Tennessee Code Annotated 68-11-804(c)31: All nursing homes shall disinfect contaminated articles and surfaces, such as mattresses, linens, thermometers and oxygen tents.</p> <p>Based on policy review, review of a manufacturer's guideline, observation and interview, it was determined the facility failed to ensure a practice to prevent the spread of infection was followed when 2 of 6 nurses (Nurse #1 and 4) observed administering medications failed to clean the glucometer with the required disinfectant.</p> <p>The findings included:</p> <p>1. Review of the facility's "Caring for the EvenCare G2 Meter [glucometer] Cleaning and</p>	N 629	<p>4/26/12</p> <p>The Facility will maintain infection control program.</p> <p>DON re-educated all Nurses to use Gluco Chlor wipes to disinfect glucometers. DON re-educated all Nursing Staff on proper hand washing procedure.</p> <p>All Residents have the potential to be at risk for alleged practice.</p> <p>Nurses inserviced to clean glucometers before and after each use with an approved cleaning cloth per manufacture recommendations. Nursing staff inserviced on proper hand washing during med pass and meal time.</p> <p>All staff were required to demonstrate proper hand washing</p> <p>DON or Designee will monitor proper infection control procedures when cleaning the glucometer and hand washing one shift per day for one week, then weekly on one shift for one monthly, then monthly on each shift times two months and then quarterly during the Facility Pharmacist routine med pass evaluations for six months. Finding will be reported to QA monthly until complete. Hand washing procedures during meal pass will be monitored weekly x 4 weeks, then monthly x 4 and then quarterly. Finding will be reported to QA.</p> <p style="text-align: right;">RECEIVED APR 12 2012</p>

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM

6899

BIW711

TITLE

*Administrator*

(X6) DATE

4/12/12

If continuation sheet 1 of 4

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N 629	Continued From page 1  Disinfecting" policy documented, "...Both cleaning AND disinfection should be done when meters are shared... Disinfection guidelines: To disinfect your meter, clean the monitor first, and then wipe it down with a damp cloth using a 10 percent bleach solution...."  Review of the manufacturer's guidelines for the Micro-Kill Germicidal Wipe used to clean the glucometer did not document that bleach was present in the wipe.  a. Observations outside Resident #6's room on 3/26/12 at 7:15 AM, Nurse #1 cleaned the glucometer with a Micro-Kill wipe instead of a cloth with a 10 percent bleach solution.  b. Observations outside Resident #2's room on 3/26/12 at 4:42 PM and 4:48 PM, Nurse #4 cleaned the glucometer with a Micro-Kill wipe instead of a cloth with a 10 percent bleach solution.  During interview in the Director of Nursing's (DON) office on 3/27/12 at 2:35 PM, the DON stated that the G2 meters are new and that they should be cleaned with a bleach solution.	N 629		
N 767	1200-8-6-.06(9)(i) Basic Services  (9) Food and Dietetic Services.  (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.	N 767		

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N 767	<p>Continued From page 2</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 stored under sanitary conditions as evidenced by opened containers of refrigerated foods which were both outdated and/or undated on 1 of 2 (3/26/12) days surveyed.</p> <p>The findings included:</p> <p>Review of the facility's "Food Storage" policy and procedure documented, "...All foods stored in refrigerators and freezers that have been opened, will be covered and labeled with the date and name of food if appropriate, and will be discarded within the appropriate time frame... All leftover foods are to be stored in covered containers, dated, &amp; [and] labeled... All condiments that have been opened should be refrigerated and discarded after 30 days..."</p> <p>Observations in the kitchen on 3/26/12 beginning at 6:30 AM, revealed the following items in Refrigerator #1:</p> <p>a. 1 opened 16 ounces (oz.) container of ranch dip dated 1/24/12.</p> <p>b. 1 opened 16 oz. container of French onion dip dated 1/24/12.</p>	N 767	<p style="text-align: right;">4/26/12</p> <p>The Facility will ensure that food will be stored under sanitary conditions.</p> <p>DSM made QA round in kitchen to ensure all food label and dated properly.</p> <p>Dietary staff was inserviced on how to store food properly and labeling of food. All open foods will be stored properly and labeled with date and name of food when appropriate &amp; discarded in appropriate time frame.</p> <p>DM will monitor food storage daily x 2 weeks, then 2 times a week x 1 month, then monthly and report findings to QA monthly.</p>	

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N 767	<p>Continued From page 3</p> <p>c. 2 opened 5 pound (lb.) containers of pimento cheese, each undated.</p> <p>d. 1 opened 5 lb. container of ricotta cheese dated 2/13/12.</p> <p>e. 1 opened 1 gallon jar of olives, containing approximately 1 pint of olives and liquid, undated. A printed label on the olive jar documented, "...Christmas party..."</p> <p>Observations in the kitchen on 3/26/12 beginning at 1:20 PM, revealed the following items in Refrigerator #1:</p> <p>a. 2 opened 5 lb. containers of pimento cheese, each undated.</p> <p>b. 1 opened 5 lb. container of ricotta cheese dated 2/13/12.</p> <p>c. 1 opened 1 gallon jar of olives, containing approximately 1 pint of olives and liquid, undated. A printed label on the olive jar documented, "...Christmas party..."</p> <p>During an interview in the kitchen on 3/26/12 at 1:30 PM, the Dietary Manager (DM) was asked how long opened food could be stored before discarding it. The DM replied, "...3 days..." The DM was asked about the undated pimento cheese and olives. The DM stated, "...we opened the pimento cheese on 3/23/12 and should have dated it... we opened the olives last weekend and should have dated it..." The DM was asked about the containers of ranch and French onion dip. The DM stated, "...they are disposed of..."</p>	N 767		

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