

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/23/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445123	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2015
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NAME OF PROVIDER OR SUPPLIER ALEXIAN VILLAGE OF TENNESSEE	STREET ADDRESS, CITY, STATE, ZIP CODE 671 ALEXIAN WAY SIGNAL MOUNTAIN, TN 37377
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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)	(X6) COMPLETION DATE
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K 071 SS=F	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Rubbish Chutes, Incinerators and Laundry Chutes:</p> <p>(1) Any existing linen and trash chute, including pneumatic rubbish and linen systems, that opens directly onto any corridor is sealed by fire resistive construction to prevent further use or is provided with a fire door assembly having a fire protection rating of 1 hour. All new chutes comply with section 9.5.</p> <p>(2) Any rubbish chute or linen chute, including pneumatic rubbish and linen systems, is provided with automatic extinguishing protection in accordance with 9.7.</p> <p>(3) Any trash chute discharges into a trash collection room used for no other purpose and protected in accordance with 8.4.</p> <p>(4) Existing flue-fed incinerators are sealed by fire resistive construction to prevent further use. 19.5.4, 9.5, 8.4, NFPA 82</p> <p>This STANDARD is not met as evidenced by: Based on observation, the facility failed to have laundry chute doors close to a positive latch.</p> <p>The findings include:</p> <p>Observation on 10/22/15 at 1:00 PM revealed 6 of 6 laundry chute doors would not close to a positive latch.</p> <p>This finding was verified by the maintenance director and acknowledged by the administrator</p>	K 071	<p>K071 NFPA 101 LIFE SAFETY CODE STANDARD</p> <ol style="list-style-type: none"> Door latches on all laundry chute doors were replaced on 11/2/15. Director of plant operations or designee reviewed all latching doors to ensure proper functioning. Administrator (Attachment #10 A) educated all staff on notification of needed repairs including laundry chute latches not working properly. Director of plant operations or designee will complete check of all laundry doors daily for 2 weeks. Then weekly for 2 weeks. Then monthly for 11 months. Results will be reported in monthly QAPI meeting. 	11/18/2015
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LABORATORY DIRECTORS OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE 11-18-15

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.

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K 071	Continued From page 1 during the exit conference on 10/22/15. NFPA 80 9-3.1 & 3-4.1*	K 071		
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