

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN4001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 77 - LICENSURE B. WING: _____	(X3) DATE SURVEY COMPLETED 07/01/2013
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NAME OF PROVIDER OR SUPPLIER BENCHMARK HEALTHCARE OF PURYEAR INC	STREET ADDRESS, CITY, STATE, ZIP CODE 220 COLLEGE STREET PURYEAR, TN 38251
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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 848	<p>1200-8-6-.08 (18) Building Standards</p> <p>(18) It shall be demonstrated through the submission of plans and specifications that in each nursing home a negative air pressure shall be maintained in the soiled utility area, toilet room, janitor ' s closet, dishwashing and other such soiled spaces, and a positive air pressure shall be maintained in all clean areas including, but not limited to, clean linen rooms and clean utility rooms.</p> <p>This Rule is not met as evidenced by: Based on observation, it was determined the facility failed to maintain a negative air pressure in all soiled utility rooms, janitor's closets and toilet rooms.</p> <p>The findings included:</p> <p>Observations during the initial tour on 7/1/13 beginning at 10:00 AM revealed exhaust fans failed to operate in the following areas:</p> <ul style="list-style-type: none"> a. 200 hall soiled utility room. b. Kitchen janitor's closet. c. All resident shower rooms and toilet rooms. <p>These findings were verified by the maintenance supervisor and acknowledged by the administrator during the exit conference on 7/1/13.</p>	N 848	<p>N848</p> <p>The belts were replaced on 7/2/13 to make the exhaust fans operational that service the 200 hall soiled utility room, the kitchen janitor's closet and the resident shower room and toilet room.</p> <p>All belts for all exhaust fans for the entire building were replaced on 7/2/13 to ensure negative air pressure is maintained throughout the entire building.</p> <p>A system has been implemented to ensure the exhaust fan belts for all exhaust fans throughout the entire building are being inspected periodically.</p> <p>Any future noncompliance with negative air pressure requirements resulting from exhaust fan belts needing replacement will be reported to the QA&A Committee by the Environmental Supervisor and immediate action taken to resolve the issue.</p>	8/3/13
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]* TITLE: Administrator (X5) DATE: 7/15/13

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