

PREFIX TAG	(EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	LSC PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	LSC COMPLETE DATE
N 629	<p>1200-8-6-.06(3)(b)8. Basic Services</p> <p>(3) Infection Control.</p> <p>6. 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, observation and interview, it was determined the facility failed to ensure 1 of 3 (Nurse #2) nurses disinfected contaminated articles when Nurse #2 placed the glucometer on the bedside table without a barrier and failed to disinfect a glucometer after performing accuchecks.</p> <p>The findings included:</p> <p>Review of the facility's "USE AND SANITATION OF GLUCOMETER" policy documented, "...The Glucometer should be sanitized by using the</p>	N 629	<p>Per TN Code Annotated 68-11-804(c)31 All nursing homes shall disinfect contaminated articles and surfaces, such as mattresses, linens, thermometers and oxygen tents. Nurse #2 and all nursing staff of the facility will use the policy and procedure for "Use and Sanitation of the Glucometer", policy documented... "the Glucometer should be sanitized by using the Sani-Cloth Germicidal Wipers, before and after use to help prevent the development and transmission of disease and infection... Wash hands and dry, place a barrier on a clean bedside table... using the Sani-Cloth Germicidal Wipeclean your glucometer.. do the test... remove your gloves and clean machine using another Sani-Cloth Germicidal Wipe... Place the glucometer in the locked cart..."</p> <p>This facility, all Licensed Nurses and Nurse #2 will use the cleaning policy and procedure for the glucometer as policy states. Nurse #2 was in-serviced and counseled this policy and procedure is to be used for all residents in this facility.</p>	<p>9-25 2011</p>

Division of Health Care Facilities

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

STATE FORM

(X) DATE

Use sheet 1 of 3

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Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN4001	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/08/2011
NAME OF PROVIDER OR SUPPLIER ARBOR PLACE OF PURYEAR INC		STREET ADDRESS, CITY, STATE, ZIP CODE 220 COLLEGE STREET PURYEAR, TN 38261		
(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
N 629	Continued From page 1 Sani-Cloth Germicidal Wipes, before and after use to help prevent the development and transmission of disease and infection... Wash hands and dry, place barrier on a clean bedside table... Using the Sani-Cloth Germicidal Wipe cleanse off the Glucometer... Do the test... Remove your gloves and clean machine using another Sani-Cloth Germicidal Wipe... Place the Glucometer in the locked cart... Observations during medication administration in Random Resident (RR) #2's room on 9/6/11 at 11:23 AM, Nurse #2 took the glucometer into RR #2's room, placed the glucometer on the bedside table without a barrier, performed the accucheck and returned the glucometer to the medication cart without cleaning the glucometer or the bedside table. Observations during medication administration in Resident #1's room on 9/6/11 at 12:05 PM, Nurse #2 took the glucometer into Resident #1's room, placed the glucometer on the bedside table without a barrier, performed the accucheck and returned the glucometer to the medication cart without cleaning the glucometer or the bedside table.	N 629		
N 645	1200-8-6-.06(3)(k) Basic Services (3) Infection Control. (k) Space and facilities for housekeeping equipment and supply storage shall be provided in each service area. Storage for bulk supplies and equipment shall be located away from patient care areas. The building shall be kept in good repair, clean, sanitary and safe at all times.	N 645	(k) Space and facilities for housekeeping equipment and supply storage shall be provided in each service area. Storage for bulk supplies and equipment shall be located away from patient care areas. The building shall be kept in good repair, clean, sanitary and safe at all times.	

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN4001	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/08/2011
NAME OF PROVIDER OR SUPPLIER ARBOR PLACE OF PURYEAR INC		STREET ADDRESS, CITY, STATE, ZIP CODE 220 COLLEGE STREET PURYEAR, TN 38251		
(X4) ID PREFIX TAG N 645	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG N 645	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE 9-25 2011
	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #19</p> <p>Tennessee Code Annotated 68-11-804(c)19 The nursing home shall be clean and sanitary and in good repair at all times.</p> <p>Based on policy review, observation and interview, it was determined the facility failed to ensure the environment was clean, sanitary and odor free as evidenced by a brown substance buildup on the hopper and foul odor in the soiled linen room on 1 of 2 (hall 1) halls.</p> <p>The findings included:</p> <p>Review of the facility's "Cleaning of the Soiled Hopper Room Disposing of Soiled Linen and Incontinent Supplies" policy documented, "It is the policy of this facility to keep the hopper rooms as clean as possible, this will include but is not limited to the hopper itself... to eliminate odors, The hopper will be cleaned and disinfected twice a shift..."</p> <p>Observation in the soiled linen room on hall 1 on 9/5/11 at 10:55 AM and 4:50 PM and on 9/7/11 at 8:40 AM and 10:20 AM, revealed a foul odor, a large clump of brown substance and several smaller clumps of the brown substances on the hopper.</p> <p>During an interview in the soiled linen room on hall 1 on 9/7/11 at 2:15 PM, the Director of Nursing (DON) was asked what the brown substance was on the hopper. The DON stated, "probably poop... this is to be cleaned every shift, this smells really funky."</p>		<p>TN Code Annotated 68-11-804(c)19: The nursing home shall be clean and sanitary and in good repair at all times. The facility's policy and procedure "Cleaning of the Soiled Hopper Room Disposing of Soiled Linen and incontinent Supplies" policy documented, "It is the policy of this facility to keep the hopper rooms as clean as possible, this will include but is not limited to the hopper itself...to eliminate odors,the hopper will be cleaned and disinfected twice a shift..." In service was given to the nursing staff and housekeeping staff on the Policy for "Cleaning of the Soiled Linen and Incontinent Supplies" Housekeeping will clean hopper and receptacles(barrels) first thing in the AM and least twice a shift and PRN. Soiled disposable incontinent supplies and dirty rinsed linen will be bagged and placed in the appropriate barrel and emptied every shift and PRN. Visible BM is to be cleaned off any areas of the hopper, floor, or wall with disinfectant. Automatic deodorizers were put up in this area. The Don and or her designee will monitor this area daily and PRN if odors are noticed P&P will be used to eliminate odors. This tag will be monitored by the Quality Assurance Committee until next</p>	