

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN6007	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	AUG 24 2012 (X3) DATE SURVEY COMPLETED 08/10/2012
NAME OF PROVIDER OR SUPPLIER ASHTON PLACE HEALTH & REHAB CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 3030 WALNUT GROVE RD MEMPHIS, TN 38111		
(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 000	<p>Initial Comments</p> <p>1200-13-1-.08 (1) Each Long Term Care Facility participating in the medical assistance program must develop and consistently implement policies and procedures regarding its admissions, including the development and maintenance of a single wait list of persons requesting admission to those facilities. This list must at a minimum contain the following information pertaining to each request for admission:(b) The name of the contact person or designated representative other than the applicant (if any). (c) The address of the applicant and the contact person or designated representative (if any).(d) The telephone number of the applicant and the contact person or designated representative (if any).(f) The sex and race of the applicant. (g) The date and time of the request for admission.(i) The name and title of the Long Term Care Facility Staff person taking the application for the admission. (j) A notation stating whether the applicant is anticipated to be Medicaid eligible at time of admission or within one year of admission.</p> <p>This Rule is not met as evidenced by:</p> <p>Based on review of the facility's denial inquiry log and interview, it was determined the facility failed to ensure the contact person or designated representative; the address of the applicant and the contact person; the telephone number of the applicant and the contact person or representative; the sex and race of the applicant; the date and time of the request for admission; the name and title of the facility staff taking the application for admission and a notation regarding the applicants Medicaid eligible status was included on the single wait list for the 31 persons listed on the denial inquiry log from</p>	N 000	<p>The statements made on this plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies herein. To remain in compliance with all federal and state regulations, Ashton Place Rehab and Care Center has taken or will take the actions set forth in the following plan of correction. The following plan of correction constitutes the center's allegation of compliance. All alleged deficiencies cited have been or will be corrected by the date or dates indicated.</p> <ol style="list-style-type: none"> 1. The facility has amended their single wait list on 8/23/12 to include the necessary components listed in this alleged deficient practice. The facility will obtain all of the required information of persons requesting admission to the facility and will make all required communication/correspondence required of facility. 2. All persons requesting admission to the facility have the potential to be affected by this alleged deficient practice. 3. The Administrator is to in-service the Admissions staff by 9/9/12 on the Linton Law, the components required when persons requesting admission into the facility, and the use of the approved single wait list. 4. The Administrator will review the single wait list monthly for the next three months and will refer this information to the Quality Assurance Committee monthly for the next three months for further recommendations. 	9/9/12

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(X6) DATE

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

STATE FORM

6899

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If continuation sheet 1 of 7

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N 000	<p>Continued From page 1 12/19/2011 through 7/24/2012.</p> <p>The findings included:</p> <p>Review of the facility's denial inquiry log listed 31 persons from 12/18/2011 through 7/24/2012 all of whom had been denied admission to the facility. There was no contact person or representative documented on the log. The address of the applicant and the contact person or designated representative was not documented; the telephone number of the applicant and contact person was not documented; the sex of the applicant was not documented; the time of the request for admission was not documented; the name and title of the facility staff taking the request was not documented and the Medicaid eligible status at time of admission was not documented on the log.</p> <p>During an interview in the conference room on 8/7/12 at 3:00 PM, the Administrator stated, "We do not have a wait list, our census is low and we admit all..."</p> <p>During an interview in the conference room on 8/10/12 at 9:10 AM, the Administrator stated, "We use the denial inquiry log... this is where we document all referrals that are denied admission."</p> <p>1200-13-1-.08(2) The wait list should be updated and revised at least once each quarter to remove the names of previous applicants who are no longer interested in admission to the Long Term Care Facility. Following three (3) contacts each separated by a period of at least ten (10) days, the Long term Care Facility shall, consistent with the written</p>	N 000			

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N 000	<p>Continued From page 2</p> <p>notice required in this section move an applicant to the end of the single admission list whenever an available bed is not accepted at the time of the vacancy, but the applicant wishes to remain on the admissions list. Applicants shall be advised of these policies at the time of their inquiry, and must be notified in writing, in a format approved by the Department, when their name is removed from the list or moved to the end of the list. Such contacts shall be documented in the facility log containing the wait list. The date, time and method of each contact shall be recorded along with the name of the facility staff person making the contact, and the identity of the applicant or contact person contacted. The log of such contacts shall also summarize the communication between the facility staff person and the applicant or contact person.</p> <p>This Rule is not met as evidenced by:</p> <p>Based on review of the facility's denial inquiry log and interview, it was determined the facility failed to ensure a single wait list was updated and revised quarterly; failed to document contacts with applicants; failed to provide written notices to applicants; failed to maintain documentation of the date, time, method of each contact and the name of the facility staff person making the contact; and failed to summarize the communication between the facility staff person and the applicant or contact person.</p> <p>The findings included:</p> <p>Review of the facility's denial inquiry log listed 31 persons from 12/18/2011 through 7/24/2012 all of which had been denied admission to the facility. There was no documentation of the applicants who had been admitted to the facility.</p>	N 000		

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N 000	Continued From page 3 During an interview in the conference room on 8/7/12 at 3:00 PM, the Administrator stated, "We do not have a wait list, our census is low and we admit all..." During an interview in the conference room on 8/10/12 at 9:10 AM, the Administrator stated, "We use the Denial Inquiry Log... this is where we document all referrals that are denied admission." 1200-13-1-.03(3) Each facility shall send written confirmation that an applicant's name has been entered on the wait list, their position on the wait list, and a notification of their right of access to the wait list as provided in paragraph (8) of these rules. This confirmation shall include at a minimum the date and time of entry on the wait list and shall be mailed by first class postage to the applicant and their designated representative (if any) identified pursuant to the requirements in paragraph (1) above. This Rule is not met as evidenced by: Based on review of the facility's denial inquiry log and interview, it was determined the facility failed to ensure a single wait list that included all applicants making request for admission and failed to ensure that written confirmation of the applicants name, their position on the list and a notification of their right of access to the wait list was completed. The findings included: Review of the facility's denial inquiry log listed 31	N 000		

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N 000	<p>Continued From page 4</p> <p>persons from 12/18/2011 through 7/24/2012 all of which had been denied admission to the facility. There was no documentation of the applicants who had been admitted to the facility. There was no documentation that written confirmation of applicants name, position on the list and notification of right to access of the wait list.</p> <p>During an interview in the conference room on 8/7/12 at 3:00 PM, the Administrator stated, "We do not have a wait list, our census is low and we admit all..."</p> <p>During an interview in the conference room on 8/10/12 at 9:10 AM, the Administrator stated, "We use the denial inquiry log... this is where we document all referrals that are denied admission."</p> <p>1200-13-1-.08(4) Each Long Term Care Facility participating in the medical assistance program shall admit applicants in the chronological order in which the referral or request for admission was received by the facility, except as permitted in paragraph (5) of this rule.</p> <p>This Rule is not met as evidenced by:</p> <p>Based on review of the facility's denial inquiry log and interview, it was determined the facility failed to document applicant admissions resulting in being unable to document if admissions were in chronological order or document the reason for deviation.</p> <p>The findings included:</p> <p>Review of the facility's denial inquiry log listed 31</p>	N 000		
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N 000	<p>Continued From page 5</p> <p>persons from 12/18/2011 through 7/24/2012 all of which had been denied admission to the facility. There was no documentation of the applicants who had been admitted to the facility.</p> <p>During an interview in the conference room on 8/7/12 at 3:00 PM, the Administrator stated, "We do not have a wait list, our census is low and we admit all..."</p> <p>During an interview in the conference room on 8/10/12 at 9:10 AM, the Administrator stated, "We use the denial inquiry log... this is where we document all referrals that are denied admission."</p> <p>1200-13-1-.08(7) If an applicant, whether on his or her own behalf or acting through another, requests admission or to be placed on a list of applicants awaiting admission, the information on the waiting list must be recorded and preserved.</p> <p>This Rule is not met as evidenced by:</p> <p>Based on review of the facility's denial inquiry log and interview, it was determined the facility failed to document all requests for admission to the facility on a single wait list.</p> <p>The findings included:</p> <p>Review of the facility denial inquiry log listed 31 persons from 12/18/2011 through 7/24/2012 all of which had been denied admission to the facility. There was no documentation of the applicants who had been admitted to the facility.</p> <p>During an interview in the conference room on</p>	N 000		

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N 000	Continued From page 6 8/7/12 at 3:00 PM, the Administrator stated, "We do not have a wait list, our census is low and we admit all..." During an interview in the conference room on 8/10/12 at 9:10 AM, the Administrator stated, "We use the denial inquiry log... this is where we document all referrals that are denied admission."	N 000			

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