

Division of Health Care Facilities

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AUG 27 2010

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  TN7934	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED  08/11/2010
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NAME OF PROVIDER OR SUPPLIER  APPLINGWOOD HEALTH CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1536 APPLING CARE LANE CORDOVA, TN 38018
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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
N 902	<p>1200-8-6-09(2) Life Safety</p> <p>(2) The nursing home shall provide fire protection by the elimination of fire hazards, by the installation of necessary fire fighting equipment and by the adoption of a written fire control plan. Fire drills shall be held at least quarterly for each work shift for nursing home personnel in each separate patient-occupied nursing home building. There shall be a written report documenting the evaluation of each drill and the action recommended or taken for any deficiencies found. Records which document and evaluate these drills must be maintained for at least three (3) years. All fires which result in a response by the local fire department shall be reported to the department within seven (7) days. The report shall contain sufficient information to ascertain the nature and location of the fire, its probable cause and any injuries incurred by any person or persons as a result of the fire. Initial reports by the facility may omit the name(s) of resident(s) and parties involved, however, should the department find the identities of such persons to be necessary to an investigation, the facility shall provide such information.</p> <p>Authority: T.C.A. §§4-5-202, 4-5-204, 68-11-202, 68-11-204, 68-11-206, and 68-11-209.</p> <p>This Rule is not met as evidenced by: Based on observations, it was determined the facility failed to maintain the electrical rooms free from combustible storage.</p> <p>The findings included:  Observations of the service hall electrical room on 8/9/10 beginning at 9:30 AM, revealed combustibles stored in it.</p>	N 902	<p>N902 1200-8-6-09(2) Life Safety</p> <p>Requirement: The nursing home shall provide fire protection by the elimination of fire hazards, by the installation of necessary firefighting equipment and by the adoption of a written fire control plan. Fire drills shall be held at least quarterly for each work shift for nursing home personnel in each separate patient-occupied nursing home building. The shall be a written report documenting the evaluation of each drill and the action recommended or taken for any deficiencies found. Records which document and evaluate these drills must be maintained for at least three (3) years. All fires which result in a response by the local fire department shall be reported to the department within seven (7) days. The report shall contain sufficient information to ascertain the nature and location of the fire. Initial reports by the facility may omit the name(s) of resident(s) and parties involved, however, should the department find the identities of such persons to be necessary to an investigation, the facility shall provide such information.</p> <p>Corrective Action: 1. The combustible cardboard boxes were immediately removed from the electrical room.</p> <p>2. The total electrical room was inspected to insure no additional combustible materials were present.</p> <p>3. The maintenance department personnel were in serviced by the Administrator on 8/13/10 on the requirement to keep all combustibles out of the electrical room.</p> <p>4. The safety committee will include an inspection for compliance.</p>	8/20/20

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  
*George Murchison*

TITLE  
*Administrator*

(X6) DATE  
8/23/10

STATE FORM

6899

14C321

If continuation sheet 1 of

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  TN7934	(X2) MULTIPLE CONSTRUCTION <b>AUG 27 2010</b> A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED  08/11/2010
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N1411	<p>1200-8-6-.14(2)(a)5.(iii) Disaster Preparedness</p> <p>(2) Physical Facility and Community Emergency Plans.</p> <p>(a) Physical Facility (Internal Situations).</p> <p>5. Each of the following disaster preparedness plans shall be conducted annually prior to the month listed in the plan. Drills are for the purpose of educating staff, resource determination, testing personnel safety provisions and communications with other facilities and community agencies. Records which document and evaluate these drills must be maintained for at least three (3) years.</p> <p>(iii) Bomb Threat Procedures Plan, to be exercised at any time during the year:</p> <p>(l) Staff duties by department and job assignment; and,</p> <p>(II) Search team, searching the premises.</p> <p>This Rule is not met as evidenced by: Based on record review, it was determined the facility failed to conduct and maintain a record of a disaster drill for a tornado.</p> <p>The findings included: Record review revealed the facility failed to conduct and record a tornado drill prior to March of this year.</p>	N1411	<p>N-1411 1200-8-6-14(2)(a)5.(111) Disaster Preparedness</p> <p>Requirement: (2) Physical Facility and Community Emergency Plans.</p> <p>(a) Physical Facility (Internal Situations)</p> <p>5. Each of the following disaster preparedness plans shall be conducted annually prior to the month listed in the plan. Drills are for the purpose of educating staff, resource determination, testing personnel safety provisions and communications with other facilities and community agencies. Records which document and evaluate these drills must be maintained for at least three (3) years.</p> <p>(iii) Bomb Threat Procedures Plan, to be exercised at any time during the year.</p> <p>(1) Staff duties by department and job assignment; and,</p> <p>(11) Search team, searching the premises.</p> <p>Corrective Action: 1. The facility will conduct emergency drills to include Tornado, Bomb Threat, Flood, Earthquake, with Tornado Drill being conducted prior to March each year. 2. The safety coordinator will conduct all drills on each shift to insure staff is educated in procedures. 3. The safety coordinator was in serviced by the Administrator on 8/13/10 to insure that all safety drills are conducted in a timely manor. 4. The safety committee will monitor compliance time tables to insure compliance.</p>	8/20/2010