

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

PRINTED: 05/24/2013

FORM APPROVED
OMB NO. 0938-0391

45th 7/06/13

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445483	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/22/2013
NAME OF PROVIDER OR SUPPLIER APPALACHIAN CHRISTIAN VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 2012 SHERWOOD DRIVE JOHNSON CITY, TN 37601	
(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) COMPLETION DATE
F 241	INITIAL COMMENTS An annual Recertification survey and complaint investigation #31379 were completed at Appalachian Christian Village on May 20 – 22, 2013. No deficiencies were cited related to complaint investigation #31379 under 42 CFR Part 483.13, Requirements for Long Term Care Facilities.	F 241	<ul style="list-style-type: none"> Corrective action for resident #90: The resident will not be brought to the dining area until her meal is ready to be served and a staff member is available to assist with her meal. This will be observed by the Skilled Unit Manager and LPN Charge Nurse. 	05/23/2013
F 241 SS=D	483.15(a) DIGNITY AND RESPECT OF INDIVIDUALITY The facility must promote care for residents in a manner and in an environment that maintains or enhances each resident's dignity and respect in full recognition of his or her individuality. This REQUIREMENT is not met as evidenced by: Based on medical record review, observation, and interview, the facility failed to maintain dignity and respect for one resident (#90) of thirty-one residents reviewed. The findings included: Resident #90 was admitted to the facility on January 7, 2010, with diagnoses including Dementia, Depression, and Hyperglycemia. Medical record review of a Quarterly Nutritional assessment dated February 20, 2013, revealed "...Diet Order Puree..." Medical record review of the Care Plan dated March 17, 2013, revealed fed by staff due to diagnoses of Dementia and use of a pureed diet.	F 241	<ul style="list-style-type: none"> To identify other residents having the potential to be affected by the same deficit practice: Observation for six meals during the period of 05/23/2013 and 05/24/2013 revealed no other resident affected by this practice. Observation by the Skilled Unit Manager and RN Supervisor. Observation during meal service will be conducted by the Skilled Unit Manager and/or LPN Charge Nurse to ensure deficit practice does not occur. In-service has been completed for all nursing staff of the proper procedure during meal service to ensure the residents' dignity is preserved. Random observation of meals times will be conducted by the Skilled Unit Manager or his designee to ensure the residents' dignity is preserved during meal services. This will be done daily for 14 days, to be completed by 06/10/2013, and then once quarterly after this date. Results will be taken to the QA Committee for review and approval. 	05/25/2013 05/28/2013 06/10/2013

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

TITLE

(X6) DATE



Administrator 6/6/13

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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F 241	Continued From page 1 Observation on May 20, 2013, at 12:10 p.m. through 12:25 p.m. in the small dining room, revealed the resident sitting in a wheelchair next to three residents eating lunch. Observation at 12:25 p.m. revealed Certified Nurse Aide (CNA) #1 took the resident to the main dining room and placed the resident at a table with one resident being fed. Observation at 12:33 p.m. in the main dining room revealed the resident's tray was placed in front of the resident. Continued observation at 12:35 p.m. revealed the CNA started feeding the resident. Interview with CNA #1 on May 21, 2013, at 12:36 p.m., in the main dining room revealed the pureed trays were served after the regular trays. Interview with the Dietary Manager on May 22, 2013, at 7:45 a.m. in the kitchen revealed residents with a pureed diet were served last. Continued interview confirmed if the staff placed residents on a regular diet and a pureed diet together at the same table, the residents on a pureed diet would eat last. Further interview confirmed the facility failed to respect the resident's dignity.	F 241		
F 278 SS = D	483.20(g) - (j) ASSESSMENT ACCURACY/COORDINATION/CERTIFIED The assessment must accurately reflect the resident's status. A registered nurse must conduct or coordinate each assessment with the appropriate participation of health professionals.	F 278	<ul style="list-style-type: none"> Significant correction of 04/25/2013 MDS assessment was done to reflect corrected information. Dietary Manager reviewed his assessment and completed a correction assessment. Dietary Manager did an MDS Audit, along with oral screenings and interviews with all residents, to ensure deficit practice did not affect any other residents. 	05/22/2013 05/28/2013

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F 278	<p>Continued From page 3</p> <p>and Coronary Artery Disease.</p> <p>Medical record review of a Nurses' Admission Assessment dated April 19, 2013, revealed, "...patient wears: dentures...glasses...other (with a box beside each word for staff to indicate the presence of the appliance)..." Further review revealed no boxes were checked.</p> <p>Medical record review of an Initial/Annual Nutritional History/Assessment dated April 23, 2013, revealed "...dental condition...dentures...upper..."</p> <p>Medical record review of an admission Minimum Data Set (MDS) dated April 25, 2013, revealed the resident had "...no broken or loosely fitting full or partial denture (chipped, cracked, uncleanable, or loose)..."</p> <p>Observation of the resident on May 20, 2013, at 3:16 p.m., in the resident's room, revealed the resident had missing bottom teeth and an upper denture. Interview with the resident at that time revealed "...I have had an upper denture for some time and most of my bottom teeth are missing...denture has a crack in it...may need some oral surgery first...have to have surgery before they will repair my denture or pull the rest of my bottom teeth..."</p> <p>Interview with the Dietary Manager on May 21, 2013, at 2:34 p.m., at the nurses' station, confirmed the MDS dental assessment was completed by the Dietary Manager. Further interview revealed "I did not look at (the resident), I took the information from the Nurses' Admission Assessment form."</p>	F 278			

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F 278	Continued From page 4 Interview with the Director of Nursing on May 21, 2013, at 2:42 p.m., in the conference room, confirmed the MDS and the Nurses' Admission Assessment were incorrect.	F 278		
F 412 SS=D	483.55(b) ROUTINE/EMERGENCY DENTAL SERVICES IN NFS The nursing facility must provide or obtain from an outside resource, in accordance with §483.75(h) of this part, routine (to the extent covered under the State plan); and emergency dental services to meet the needs of each resident; must, if necessary, assist the resident in making appointments; and by arranging for transportation to and from the dentist's office; and must promptly refer residents with lost or damaged dentures to a dentist. This REQUIREMENT is not met as evidenced by: Based on medical record review, observation, and interview, the facility failed to provide dental services to two residents (#64, #58) of thirty-one residents interviewed. The findings included: Resident #64 was admitted to the facility on September 12, 2012, with diagnoses including Anxiety, Depression, Tachycardia, Edema, and Chronic Obstructive Pulmonary Disease. Medical record review of the Care Plan dated January 3, 2013, revealed "...diet changed to mech (mechanical) soft resident request D/T (due to) chewing problems..."	F 412	<ul style="list-style-type: none"> Residents #58 and #64 were seen by dentist on 05/23/2013. #58 was referred to an oral surgeon for consultation. Appointment date: 07/13/2013. #64 was seen on 05/23/2013. An impression was made at that time and one tooth extracted. A new partial was made and the dentist delivered and placed in resident's mouth to ensure proper fit. An oral screen will be done on any resident that has accepted the service. A recommendation will be made to resident and/or family at that time. A Referral Request Form has been made available for any staff to complete. These referrals will be given to the dentist at each visit for oral screen and recommendation for needed service to all residents that accept the service. Services will continue to be offered at time of admission. Skilled Unit Manager or his designee will monitor any referrals and ensure care has been given to residents and will report results from the Referral Request Log to the QA Committee for review for the next two quarters. 	05/30/2013 06/04/2013 and 06/06/2013 05/23/2013 06/10/2013

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F 412	<p>Continued From page 5</p> <p>Medical record review of a Dental Agreement dated December 13, 2012, revealed "...I agree and request the following services...Dentist: Hygienist...:</p> <p>Medical record review of a Service Planned (dental record) dated February 21, 2013, revealed "...Recement #22...possible need for ext (extension) and add to partial..."</p> <p>Observation and interview with the resident on May 21, 2013, at 7:30 a.m., in the resident's room, revealed the resident sitting on the side of the bed. Continued observation revealed the resident had a missing crown and it was difficult to chew. The resident revealed (resident) had seen the dentist for the missing crown and the dentist had not followed up to complete the dental work.</p> <p>Interview with the Medical Records Clerk (responsible for dental appointments) on May 21, 2013, at 8:30 a.m., at the lower level nurse's station, revealed the resident had a crown off of tooth #22, and the dentist had put it back on 2-3 times. Continued interview revealed the Medical Record Clerk had spoken to the resident's family related to the dental assessment and dental insurance "awhile back" and the facility had not followed up.</p> <p>Interview with the interim Social Worker on May 22, 2013, at 9:15 a.m., revealed the resident's dental services would be no additional cost to the resident if needed.</p> <p>Interview with the Director of Nursing on May 22,</p>	F 412		

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F 412	<p>Continued From page 6</p> <p>2013, at 10:12 a.m., in the conference room, confirmed the facility had failed to follow up with the resident and dental services were not offered to the resident.</p> <p>Resident #58 was admitted to the facility on November 20, 2012, and readmitted on April 19, 2013, with diagnoses including Rib Fracture, Acute Renal Failure, Morbid Obesity, Diabetes Mellitus, Chronic Obstructive Pulmonary Disease, and Coronary Artery Disease.</p> <p>Observation of the resident on May 20, 2013, at 3:18 p.m., in the resident's room revealed the resident had missing bottom teeth and an upper denture. Interview with the resident at that time revealed "...I have had an upper denture for some time and most of my bottom teeth are missing...denture has a crack in it...may need some oral surgery first...have to have surgery before they will repair my denture or pull the rest of my bottom teeth."</p> <p>Interview with the resident on May 21, 2013, at 2:18 p.m., in the resident's room revealed "...I saw the dentist here and he told me I have to have surgery on my upper gums before they can repair my denture and pull the rest of my teeth...I would be very interested in having the work done if I didn't have to pay for it...no one here has told me that I don't have to pay for it..."</p> <p>Interview with the Director of Nursing (DON) on May 21, 2013, at 2:42 p.m., in the conference room confirmed the resident does not have to pay for dental services and the DON will have social services talk with the resident.</p>	F 412		

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F 412	Continued From page 7 Interview with the Social Services (SS) Director on May 21, 2013, at 2:45 p.m., in the SS office, confirmed the resident's dental needs had not been discussed with the resident nor had the resident been told there was no charge for dental services. Further interview revealed "I plan on talking with (the resident) today." Interview with the SS Director on May 22, 2013, at 7:31 a.m., in the SS office, revealed the SS Director talked with the resident and a "dental referral was made...I explained to (the resident) that since (resident) is a medicaid recipient that there is no charge..." Further interview revealed the resident's dental services would be no additional cost to the resident and the facility had failed to follow up with the resident regarding needed dental services.	F 412		