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Division of Health Care Facilities

STATEMENT OF DEFICIENCIES PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN7916	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/07/2012
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NAME OF PROVIDER OR SUPPLIER ERICARE HEALTH AND REHABILITATION C	STREET ADDRESS, CITY, STATE, ZIP CODE 3391 OLD GETWELL RD MEMPHIS, TN 38118
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(4) 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 645	<p>1200-8-6-.06(3)(k) Basic Services</p> <p>(3) Infection Control.</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Intakes: TN00029853, TN00029865</p> <p>Type C Pending #19</p> <p>Tennessee Code Annotated 68-11-804(c)19: The nursing home shall be clean, 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 good repair in 4 of 4 (First Floor Magoffin, Second Floor Magoffin, Second Floor McRee and First Floor McRee) halls in the facility.</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Review of the facility's "ENVIRONMENT SAFETY POLICY" documented, "[company name] strives to provide a safe and healthful working/learning environment for all residents and staff and visitors. Environment supervisor is responsible for providing a working environment free from recognized health and safety hazards." 2. Observations on the first floor Magoffin hallway on 6/6/12 at 9:15 AM, revealed the 	N 645	<p>N 645</p> <p>The facility will offer, to all residents, their families, staff members, and visitors, a sanitary, safe, and comfortable environment.</p> <p>The findings will be addressed and corrected for all members of the community, who are affected by the facility's deficient practices of proper environmental safety and sanitation, Both Nursing and Housekeeping will share in these responsibilities.</p> <p>A daily housekeeping check list is completed for the 7AM-3PM shift and filed with the Environmental Services Manager. This check list will be expanded to include more detailed areas as noted in the survey findings. The expanded check list will require housekeeping staff to utilize the Unit Maintenance Log to request review and/or repair of specific safety hazards observed during their cleaning routine.</p>	
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Division of Health Care Facilities

DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *[Signature]* TITLE: *Administrator* (X6) DATE: *6/29/12*

FORM

8899

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If continuation sheet 1 of 7

Division of Health Care Facilities

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NAME OF PROVIDER OR SUPPLIER AMERICARE HEALTH AND REHABILITATION C	STREET ADDRESS, CITY, STATE, ZIP CODE 3391 OLD GETWELL RD MEMPHIS, TN 38118
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N 645	<p>Continued From page 1</p> <p>following:</p> <p>a. Room 115: toilet tissue on floor in bathroom, dirty toilet seat and strong urine smell.</p> <p>b. Hallway: two loose wire molds with screws exposed on each side of an exit door.</p> <p>3. Observations on the second floor Magoffin hallway on 6/6/12 at 9:00 AM, revealed the following:</p> <p>a. Room 208: overbed table on window side of room was dirty and on which was multiple empty and partially filled cups and two sandwiches with a wrapper labeled "HS [hour of sleep]" snack.</p> <p>b. Room 210: rolled up blanket in front of room door.</p> <p>5. Observations on the second floor McRee hallway on 6/6/12 at 8:10 AM revealed the following:</p> <p>a. Room 504: paint peeling from the wall by the closet</p> <p>b. Room 508: paint and wall chipped away by light switch, paint bubbled up and peeling off in the closet with paint chips on the floor and a pipe under the resident's sink with a significant leak and a large plastic tote under the pipe with standing water in the tote.</p> <p>c. Room 511: clothes piled in floor of both closets spilling out onto the floor in the room.</p> <p>d. Room 514: exposed pipe with the insulation around it tearing apart.</p> <p>e. Hallway: floor tile missing by the day room and a partial chipped floor tile missing in front of soiled utility room.</p> <p>Observations in the second floor McRee hallway by room 524 on 6/6/12 at 3:20 PM, revealed a missing rounded corner handrail.</p> <p>4. Observations on the first floor McRee hallway</p>	N 645	<p>The Environmental Manager or his designee will check the Maintenance</p> <p>Log two or three times during the shift and make a final check before he (Manager) leaves his shift.</p> <p>Competition Date: July 6, 2012</p>	
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NAME OF PROVIDER OR SUPPLIER MERICARE HEALTH AND REHABILITATION (STREET ADDRESS, CITY, STATE, ZIP CODE 3391 OLD GETWELL RD MEMPHIS, TN 38118
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N 645	<p>Continued From page 2</p> <p>on 6/6/12 beginning at 9:27 AM, revealed the following:</p> <p>a. Room 408: pipe under resident's sink with a significant leak.</p> <p>b. Hallway: 2 empty soda cans on the floor across hall from the clean linen room and several pieces of paper on the floor in front of the nurses' station.</p> <p>c. Nurses' station: telephone jack hanging out of the wall.</p> <p>d. The light in the clean linen room did not work and individual latex gloves, heel boots, a hair brush, plastic wrappers, toilet tissue and an open bottle of skin lotion were laying on the floor in the corner of the clean linen room.</p> <p>During an interview in room 408 on 6/6/12 at 9:27 AM, Resident #4 was asked if he told any staff about the pipe under his sink leaking. Resident #4 stated, "Yes, they just ignore it... they were putting a plastic garbage bag over it so no one would use it..."</p> <p>During an interview in the clean linen room on First Floor McRee on 6/7/12 at 10:15 AM, the Assistant Administrator was asked if the supplies and trash laying on floor in the corner of the clean linen room was acceptable. The Assistant Administrator stated, "No... this shouldn't be here..."</p> <p>Observations in the first floor McRee hallway by room 421 on 6/6/12 at 3:25 PM, revealed a loose handrail with a cap for the bolt missing.</p> <p>Observations in the first floor McRee hallway by the storage room on 6/6/12 at 3:28 PM, revealed loose handrails on both sides of the hallway.</p> <p>Observations in the first floor McRee hallway across from room 416 on 6/6/12 at 3:30 PM,</p>	N 645	<p>N 645</p> <p>Any form of ambulation requires a safe sense of stability, especially residents with an unsteady gait. The most obvious support is a firmly secured handrail, through-out the facility.</p> <p>Handrails on the two (2) nursing units affected by the facilities deficiency in providing secure handrails have been repaired. To assure the safety of this feature for all residents, a member of the maintenance staff will complete a visual walk-around of all handrails daily, while checking each nursing unit's maintenance log. Any faulty handrail section will be repaired immediately, to avoid injury to any resident.</p> <p>Completion Date: July 6, 2012</p>	
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N 645	Continued From page 3 revealed a missing hand rail with the braces sticking out from the wall, Observations in the first floor McRee hallway by the time clock on 6/6/12 at 3:35 PM, revealed a missing hand rail with the braces stick out from the wall. 5. During an interview in the first floor McRee nurses' station on 6/7/12 at 10:05 AM, the Assistant Administrator was asked who was responsible for the maintenance of the physical environment of the facility. The Assistant Administrator stated, "...[named the Environmental Services Director]..." During an interview in the first floor McRee hallway on 6/7/12 at 11:23 AM, the Environmental Services Director (ESD) was asked how often he checked the physical environment of the facility. The ESD stated, "...on a daily basis... when you get busy and get called away... it [daily checks] doesn't always happen..."	N 645		
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N 843	1200-8-6-.08 (13) Building Standards (13) Electrical drawings shall include where applicable: (a) A seal, certifying that all electrical work and equipment is in compliance with all applicable codes and that all materials are currently listed by recognized testing laboratories; (b) All electrical wiring, outlets, riser diagrams, switches, special electrical connections, electrical service entrance with service switches, service feeders and characteristics of the light and power current, and transformers when located within the building;	N 843	N 843 An in-house communication system, connecting residents rooms, and toilet/bathing facilities to the nurse's station is critical to the total care of the resident.	
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N 843	<p>Continued From page 4</p> <p>(c) An electrical system that complies with applicable codes;</p> <p>(d) Color coding to show all items on emergency power;</p> <p>(e) Circuit breakers that are properly labeled; and</p> <p>(f) Ground-Fault Circuit Interrupters (GFCI) that are required in all wet areas, such as kitchens, laundries, janitor closets, bath and toilet rooms, etc, and within six (6) feet of any lavatory.</p> <p>This Rule is not met as evidenced by: Type C Pending Penalty #9</p> <p>Tennessee Code Annotated 68-11-804(c)9: In general patient areas, each room shall be served by at least one (1) nurse's calling station and each bed shall be provided with a call button. Two (2) call buttons serving adjacent beds may be served by one (1) calling station. Calls shall register in the nurses' station and shall activate a visible signal in the corridor. A nurses' call emergency button shall be provided for patients's use at each patient toilet, bath and shower room. Nursing personnel shall answer calls in a timely manner.</p> <p>This Rule is not met as evidenced by: Based on policy review, observation and interview, it was determined the facility failed to ensure the resident call system was functional for 2 of 4 (Residents #1 and 2) sampled residents and 4 of 17 random resident (RR) #6, 7, 8 and</p>	N 843	<p>On June 27, 2012, a communications systems company was on site to check each individual call unit in each room/ each bed. The check included both visual and audio components. Those not functioning properly were marked for repair and/or replacement.</p> <p>The six (6) residents, adversely affected by this deficient practice, were included in the system check, covering all nursing units in the facility. Until any malfunctioning unit is repaired/replaced, the resident will use a hand bell, and be checked by the nursing staff every hour until the defective call light has been repaired and/or replaced. Those units which were not working properly, during the facility-wide check, have received a hand bell. Malfunctioning units will continue to be noted in the Unit Maintenance Log, on each nursing station. Maintenance staff will check the Log each morning and makes arrangements to repair</p>	
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N 843	<p>Continued From page 5</p> <p>11).</p> <p>The findings included:</p> <ol style="list-style-type: none"> 1. Review of the facility's "ENVIRONMENT SAFETY POLICY" documented, "[company name] strives to provide a safe and healthful working/learning environment for all residents and staff and visitors. Environment supervisor is responsible for providing a working environment free from recognized health and safety hazards." 2. Observations in room 120 on 6/6/12 at 1:30 PM, revealed Resident #1's call light was not functioning. <p>During an interview in Room 120 on 6/6/12 at 1:30 PM, Resident #1 was asked if he had told staff about his call light not working. Resident #1 stated, "...yes, they won't do anything about it..."</p> <ol style="list-style-type: none"> 3. Observations in room 508 on 6/6/12 at 2:00 PM, revealed Resident #2's call light was not functioning. 4. Observations in room 120 on 6/6/12 at 1:30 PM, revealed RR #6's call light was not functioning. 5. Observations in room 417 on 6/6/12 at 1:40 PM, revealed RR #7's call light was not functioning. <p>During an interview in room 417 on 6/6/12 at 1:40 PM, RR #7 was asked if he had told staff about his call light not working. RR #7 stated, "...it never works... they won't do anything about it..."</p> <ol style="list-style-type: none"> 6. Observations in room 416 on 6/6/12 at 1:45 PM, revealed RR #8's call light was not 	N 843	<p>the item, and note time, date, and staff initials regarding the repair process.</p> <p>Completion Date: July 6, 2012</p>	

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NAME OF PROVIDER OR SUPPLIER MEDICARE HEALTH AND REHABILITATION C	STREET ADDRESS, CITY, STATE, ZIP CODE 3391 OLD GETWELL RD MEMPHIS, TN 38118
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N 843	<p>Continued From page 6</p> <p>functioning.</p> <p>7. Observations in Room 414 on 6/6/12 at 1:50 PM, revealed RR #11's call light was not functioning.</p> <p>8. During an interview in the family room on 6/7/12 at 10:30 AM, the Director of Nursing (DON) was asked what the facility's protocol is when call lights are nonfunctioning. The DON stated, "...we report it to maintenance... check every 2 hours [routine resident check]... if not working [call lights] increase to every hour..." The DON was asked if the facility was doing this for any residents. The DON stated, "No... no one has reported it to me..."</p> <p>During an interview in the first floor McRee hallway on 6/7/12 at 11:23 AM, the Environmental Services Director (ESD) was asked how often he checked the physical environment of the facility. The ESD stated, "...on a daily basis... when you get busy and get called away... it [daily checks] doesn't always happen..."</p>	N 843		