N 787 1200-8-6-06(9)(i) Basic Services

(9) Food and Dietetic Services.

(i) Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination whether in storage or while being prepared and served and/or transported through hallways.

This Rule is not met as evidenced by:
Type C Pending Penalty #22

Tennessee Code Annotated 68-11-804(c)(22):
Food shall be protected from dust, flies, rodents, unnecessary handling, droplet infection, overhead leakage and other sources of contamination, whether in storage or while being prepared and served and/or transported through hallways.

This Rule is not met as evidenced by:

Based on policy review, observations and interviews, it was determined the facility failed to ensure potatoes were stored at the recommended temperature, serving utensils were stored under sanitary conditions and hair restraints were worn correctly during 3 of 3 (1/5/10, 1/6/10 and 1/7/10) days of survey.

The findings included:

1. Review of the facility's dress code policy documented, "...Hairnets are required for all dietary staff (including director)."

Observations in the kitchen on all three days of

Christian Care Center of Cheatham County believes its current practices were in compliance with the applicable standard of care, but that in order to respond to this citation from the surveyors, the facility is taking the following additional actions:

Corrective Actions for Targeted Residents:

1. The Dietary Manager that was in place during the survey has been terminated. Hair nets are now being worn correctly by dietary staff.
2. The large serving spoons, serving spatulas and large serving ladles hanging from the rack on the wall at the end of the three compartment sink has been moved.
3. The two boxes of raw potatoes were moved to the refrigerator for storage on January 7, 2010.

Identification of Other Residents with Potential to be Affected:

1. Current residents have a potential to be affected by this cited deficiency. Daily inspections are being conducted by the Administrator or Manager on duty to ensure hair nets are being properly worn by dietary employees.
2. The large serving spoons, serving spatulas and large serving ladles hanging from the rack on the wall at the end of the three compartment sink has been moved.
3. Potatoes are being stored in the refrigerator.

Systematic Changes:

1. A sign has been posted at both entrances of the dietary department stating that hair nets must be worn to completely cover exposed hair. Hair nets are available at the entrances. The Dietary Manager that was in place during the survey has been terminated. Dietary staff was in-serviced on January 8, 2010 to ensure hair nets were being
N 767. Continued From page 1

the survey (1/5/10, 1/6/10 and 1/7/10) revealed the following:

a. On 1/5/09 at 8:40 AM, the Dietary Manager did not wear a hair restraint, and two dietary workers' hair was not completely covered with hair restraints.

b. On 1/5/09 at 2:55 PM, the Dietary Manager did not have a hair restraint on.

c. On 1/5/09 at 6:30 AM, three dietary workers' hair was not completely covered with the hair restraints.

d. On 1/5/09 at 8:16 AM, two dietary workers' hair was not completely covered with the hair restraints.

e. On 1/6/09 at 9:20 AM, the Dietary Manager did not have a hair restraint on.

f. On 1/6/09 at 11:05 AM, two dietary aides hair was not completely covered with the hair restraints and the Dietary Manager did not have a hair restraint on.

g. On 1/7/09 at 10:00 AM, the cook's hair was not completely covered with a hair restraint.

During an interview in the kitchen on 1/7/10 at 5:00 PM, the Dietary Manager stated, "I did not realize you had to wear a hairnet all the time, not just when I am working with the food. Also, I will make sure all hair is covered by all dietary employees...."

2. Observation in the dietary department on 1/5/10 at 9:40 AM, on 1/6/10 at 11:40 AM and on 1/7/10 at 7:40 AM, revealed large serving spoons, serving spatulas and large serving ladles were hanging from a rack on the wall at the end of the 3 compartment sink. The utensils were not protected from the 3 compartment sink splashback.

During an interview in the kitchen on 1/7/09 at...
5:10 PM, the Dietary Manager stated, "I will move the spatulas and spoons hanging above the three compartment sink so no contamination will occur."

3. Observation in the dietary department on 1/5/10 at 9:40 AM, on 1/6/10 at 11:40 AM and on 1/7/10 at 7:40 AM, revealed two open boxes of raw potatoes stored underneath the preparation table. The boxes were printed with instructions to store at 45 degrees Fahrenheit (F).

During an interview in the kitchen on 1/7/09 at 5:00 PM, the Dietary Manager stated, "I was unaware that potatoes had to be stored at 45 degrees Fahrenheit, I will put them [potatoes] in the refrigerator immediately."

(1) The nursing home shall establish and implement written policies and procedures setting forth the rights of residents for the protection and preservation of dignity, individually and, to the extent medically feasible, independence. Residents and their families or other representatives shall be fully informed and documentation shall be maintained in the resident's file of the following rights:

(p) To have their records kept confidential and private. Written consent by the resident must be obtained prior to release of information except to persons authorized by law. If the resident lacks capacity, written consent is required from the resident's health care decision maker. The nursing home must have policies to govern access and duplication of the resident's record;

3. The Dietary Manager will monitor to ensure potatoes are being stored in the refrigerator and will report findings to the Performance Improvement Committee, consisting of but not limited to the Medical Director, Administrator, Director of Nursing, Assistant Director of Nursing, Maintenance Director, Dietary Manager, Activity Director, Social Services Director, MDS Coordinator, Medical Records Clerk and Pharmacy Consultant, monthly for six months.

Completion Date February 3, 2010

Christian Care Center of Cheatham County believes its current practices were in compliance with the applicable standard of care, but that in order to respond to this citation from the surveyors, the facility is taking the following additional actions:

Corrective Actions for Targeted Residents:

1. Resident's in room 401 and 403's medical information is being covered on the medication administration record to protect their confidentiality.

Identification of Other Residents with Potential to be Affected:

1. Medication administration records are being covered on each of the four halls to protect the privacy of the residents.
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This Rule is not met as evidenced by:
Type C Pending Penalty #5

Tennessee Code Annotated 68-11-804(c):7
Each patient has a right to have the patient’s personal records kept confidential and private.

This Rule is not met as evidenced by:

Based on observations, it was determined 1 of 8 (Nurse #2) nurses failed to maintain the confidentiality of a residents’ medical records by not covering or closing the Medication Administration Record (MAR) during medication administration.

The findings included:

Observations of the 400 hall on 1/5/10 at 7:06 PM, revealed Nurse #2 left the MAR open outside resident rooms 401 and 403, leaving the residents medical information exposed to anyone who passed by.

Systematic Changes:

1. The current system for utilizing a cover sheet to protect the privacy of medication administration records was re-introduced and is being enforced. Charge nurses were in-serviced January 26, 2010 on the use of the cover sheet. Nurses have re-taken the HIPPA compliance test.

Monitoring:

1. The Director of Nurses will monitor for compliance and report findings to the Administrator. Department Managers have incorporated monitoring covers for medication administration records into their customer service rounds within the facility and report findings to the Administrator. Director of Nursing and Administrator will report to the Performance Improvement Committee, consisting of but not limited to the Medical Director, Administrator, Director of Nursing, Assistant Director of Nursing, Maintenance Director, Dietary Manager, Activity Director, Social Services Director, MDS Coordinator, Medical Records Clerk and Pharmacy Consultant, monthly for six months.

Completion Date February 3, 2010