N 832 Building Standards

Corrective Action for Resident Cited

1. The items A, B, and C are related and will be addressed together. The remedies for these items will be more involved as the foundation of the facility may be in question. After speaking to the member of the survey team who conducted our life safety portion (Mr. Seth M. Afatey / Fire Safety Specialist) it became apparent that a professional consultation would be necessary.

Two separate Structural Engineering firms have been contacted to provide us with an analysis of the structural disposition of the building (Logan Patri Engineering, and Charles McCann and Associates). Their inspections of the foundation and the effects as cited in the survey will be completed before 01-09-2010. The remedy to follow will be based upon their findings and recommendations to us. The final completion date of this remedy is not able to be determined at this time. However we intend to keep the State Survey Office apprised of our process as things develop.

I would also respectfully request a Desk review of this tag.

2. The missing esocuteon plate next to the shower head on the second floor shower room will be replaced.

3. The rotten window trim around the through the wall heating unit will be repaired...

4. The west and north walls of the business office will be repaired and repainted.
Monitoring Corrective Action

The Directors of the Maintenance and Housekeeping departments will submit monthly comprehensive facility plant audits along with the corrective actions to the Quality Improvement committee on a monthly basis for review. The administrator will be responsible for reviewing these reports. Findings will be analyzed and QI Committee will evaluate the effectiveness of present plan and will recommend revisions as needed.

QI committee members include but are not limited to Administrator, DON, Medical Director, Medical Records, Social Services, Activities, and Unit managers.

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N 832 Continued From page 1

The facility maintenance director verified the deficiencies as noted above.

N 901 1200-8-6-.09(1) Life Safety

(1) Any nursing home which complies with the required applicable building and fire safety regulations at the time the board adopts new codes or regulations will, so long as such compliance is maintained (either with or without waivers of specific provisions), be considered to be in compliance with the requirements of the new codes or regulations.

This Rule is not met as evidenced by:
Based on observation and manual testing, it was determined the facility failed to maintain the overall nursing home environment as required by the Tennessee Department of Health (TDOH).

The findings included:

1. Observations on 12/7/09 at 7:58 AM, revealed the night lights in resident rooms 101, 209 and 221 were burnt out when manually tested. TDOH 1200-08-06-08; National Fire Protection Association (NFPA) 101, 7.9.2.2.

2. Observations on 12/7/09 at 8:05 AM, revealed the bathroom door frames in resident rooms 205, 206 and 207 were rotten at the base and also loose from the wall. TDOH 1200-08-06-08.

The facility maintenance director verified the deficiencies as noted above.

N 901 Life Safety

Corrective Action for Resident Cited

1. The night lights in rooms 101, 209 and 221 have been repaired and are functional.

2. The bathroom door frames in resident rooms 205, 206 and 207 have been repaired.

Identification Other Residents

All residents have the potential to be effected by this deficient practice. A comprehensive physical plant audit will be conducted by the directors of maintenance and environmental services (or their designees) to identify repair needs. The needed cleaning and repairs will be addressed and completed as identified in the audit by 01-09-2010.

Measure Put in Place or System Changes

The Directors of the Maintenance department and the Housekeeping department will be educated and instructed by the administrator to conduct a monthly comprehensive facility audit to identify areas needing repair or deep cleaning. These audits will be conducted and the needs identified by the audit will be addressed and completed as indicated by 01-09-2010.

In addition, housekeeping personnel will also be educated by 01-09-2010 to identify and document identified needs on a daily basis as they move from room to room carrying out their cleaning assignments and to submit work orders to the maintenance department for identified repairs needed. Repairs will be carried out as indicated. This education will be done by their respective department directors by 01-09-2010.
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