Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/LAB IDENTIFICATION NUMBER:
TN2493

(X2) MULTIPLE CONSTRUCTION
A. BUILDING
B. WING

(X3) DATE SURVEY COMPLETED
04/19/2012

NAME OF PROVIDER OR SUPPLIER
GALLAYE HEALTH AND REHAB

STREET ADDRESS, CITY, STATE, ZIP CODE
425 OLD BROWNSVILLE RD
GALLAWAY, TN 38036

(X5) ID PREFIX TAG
N 630

N 630.06(3)(b)(9). Basic Services

9. The facility shall have written policies and procedures governing care of residents during the failure of the air conditioning, heating or ventilation system, including plans for hypothermia and hyperthermia. When the temperature of any resident area falls below 65° F, or exceeds 85° F, or is reasonably expected to do so, the facility shall be alerted to the potential danger, and the department shall be notified.

This Rule is not met as evidenced by:
Type C Pending Penalty #20

Tennessee Code Annotated 68-11-804(c)20.
When the temperature of any patient area falls below sixty-five degrees Fahrenheit (65 F) or exceeds eighty-five degrees Fahrenheit (85 F), or is reasonably expected to, the facility staff shall be alerted to the potential danger, and the department shall be notified.

Based on observation and interview, it was determined the facility failed to maintain a comfortable temperature range in 1 of 3 (100/200 hall) halls.

The findings included:

Observations in the upper 100/200 hall on:
4/17/12 at 4:00 PM, revealed a temperature of 64 degrees Fahrenheit (F).
Observation at the 100/200 hall nurses' station on:
4/19/12 at 8:15 AM, revealed an air temperature

N 630

5/15/12

The facility will maintain a comfortable temperature range between 71 - 81° as per Federal Guideline.

Employees were informed regarding the need to keep temperature levels at the comfort of the residents. New employees are educated as to this process during orientation.

Thermostats throughout the facility were immediately adjusted to a temperature of or about 75°. Thermostat covers were put into place and signage reading "Temperature is set at the resident's comfort level. Please do not attempt to adjust. For any changes please see the Maintenance Director."

Audits will be completed 5 X's weekly X's 12 weeks by the Medical Records Director.

Results of the monitoring will be presented to the Facility Quality Assurance Committee monthly X's 3 then quarterly thereafter by the Medical Records Director.


Division of Health Care Facilities

LABORATORY DIRECTOR OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

STATE FORM 6/25/12

9 continuation sheet 1 of 4
<table>
<thead>
<tr>
<th>ID</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
<th>PROVIDER'S PLAN OF CORRECTION</th>
<th>COMPLETE DATE</th>
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<tbody>
<tr>
<td>N 630</td>
<td>Continued From page 1 of 61 degrees F.</td>
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<tr>
<td>N 645</td>
<td>1200-B-6-06(3)(k) Basic Services</td>
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<td>5/15/12</td>
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<td>(3) Infection Control.</td>
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<td>(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.</td>
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<td>This Rule is not met as evidenced by:</td>
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<tr>
<td></td>
<td>Tennessee Code Annotated 68-11-804(c)19: The nursing home shall be clean, sanitary and in good repair at all times.</td>
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<td>Based on observations, it was determined the facility failed to provide housekeeping and maintenance services to maintain a sanitary, orderly and comfortable environment as evidenced by rusted bathroom door frames, damaged bathroom tiles, nightstands and</td>
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<td></td>
<td>N 645 The facility will provide housekeeping and maintenance services to maintain a sanitary, orderly and comfortable environment.</td>
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<td>100% audit of resident room equipment was completed on April 20, 2012. Night tables have been ordered.</td>
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<td>A schedule for repairing and painting patient bathroom door frames has been established.</td>
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<td>Control knobs on the air conditioner units were removed intentionally for the safety of the patients and will be added to the individual care plan as indicated in the future.</td>
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</table>
Guardian Angel Rounds are being established to monitor for damaged/broken equipment within resident rooms. This data will be brought to morning meeting to be presented to the proper department head for cleaning/repairing as necessary. Facility employees were informed regarding the need to properly record damaged equipment in the maintenance log, located at each nurses' station. New employees will be informed on the usage on the maintenance log during orientation.

Results of the data collected from the Angel Rounds and Maintenance Log for needed repairs will be presented to the Facility Quality Assurance Committee by the Housekeeping Supervisor and Maintenance Director monthly x’s 1 then quarterly thereafter.

 Allegation of compliance May 15, 2012
N 545: Continued From page 3

2. Observations during the initial tour of the 100 hall on 4/17/12 beginning at 7:45 AM, revealed a strong urine odor both inside and outside rooms #121, 122, 123, 124, 125, 126, 127 and 128 and a strong undistinguishable unpleasant odor surrounding the nurses’ station.

Observations on the 100 Hall on 4/17/12 at 11:30 AM, 2:30 PM and 4:30 PM and on 4/18/12 at 8:30 AM, 10:30 AM, 1:30 PM and 4:30 PM, revealed strong urine odors and other unpleasant odors.

Observations on the 100 Hall on 4/18/12 at 8:30 AM, 10:30 AM and 2:00 PM, revealed strong urine odors.