NAME OF PROVIDER OR SUPPLIER
LEXINGTON MANOR

STREET ADDRESS, CITY, STATE, ZIP CODE
727 EAST CHURCH STREET
LEXINGTON, TN 38551

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/COLA IDENTIFICATION NUMBER:
445431

(X2) MULTIPLE CONSTRUCTION
A. BUILDING
B. WING

(X3) DATE SURVEY COMPLETED
09/07/2012

(X4) ID PREFIX TAG
SS-D

(X5) ID PREFIX TAG
F 315

SUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)

F 315
483.25(d) NO CATHETER, PREVENT UTI, RESTORE BLADDER

Based on the resident's comprehensive assessment, the facility must ensure that a resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization was necessary; and a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.

This REQUIREMENT is not met as evidenced by:
Amended 2567

Based on medical record review, observation and interview, it was determined the facility failed to ensure the privacy bag did not touch the floor for 1 of 4 (Resident #116) sampled residents with a catheter included in the stage 2 review.

The findings included:

Medical record review for Resident #116 documented an admission date of 1/17/10 with diagnoses of Weakness, Failure to Thrive, Multi-Site Decubitus, Dementia, Hypertension, Anxiety and Depression. There was an admission date to hospice on 11/23/11 with diagnoses of Peripheral Vascular Disease with Gangrene, Hypertension, Failure to Thrive, and Weight Loss. Review of a physician's order dated 8/31/12 documented, "...Insert size 16/6 cc (cubic centimeters) F [Foley] C [Catheter] for DX [Diagnosis] of Intractable Pain..."

LABORATORY DIRECTOR'S OR PROVIDER/REPRESENTATIVE SIGNATURE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that the 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 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 required to continued program participation.
<table>
<thead>
<tr>
<th>ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETION DATE</th>
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<tr>
<td>F 315</td>
<td>Continued From page 1 Observations in Resident #116's room on 9/6/12 at 9:05 AM, revealed the resident in bed with the Foley catheter in a privacy bag touching the floor. Observations in Resident #116's room on 9/6/12 at 2:35 PM, revealed the Foley catheter privacy bag laying on the floor under the bed. During an interview in Resident #116's room on 9/6/12 at 2:35 PM, Nurse #1 was asked if it is acceptable for a Foley catheter to be on the floor. Nurse #1 stated, &quot;No.&quot; During an interview at nurses station #2 on 9/6/12 at 2:45 PM, Nurse #1 was then asked if acceptable for a Foley to be in a privacy bag and be on the floor. Nurse #1 stated, &quot;No, it is not acceptable for the privacy bag to touch the floor.&quot; During an interview in the conference room on 9/6/12 at 3:15 PM, the Director of Nursing (DON) stated, &quot;...I don't have a policy about catheters being on the floor, that is just the standard of nursing practice...&quot;</td>
<td>F 315</td>
<td>4. Nurse Management will conduct routine facility rounds and chart audits to ensure compliance and will report findings to the QA committee quarterly.</td>
<td>receipt</td>
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