<table>
<thead>
<tr>
<th>ID</th>
<th>PREFIX</th>
<th>TAG</th>
<th>STATEMENT OF DEFIENCIES AND PLAN OF CORRECTION</th>
<th>PROVIDERS PLAN OF CORRECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>N 728</td>
<td>1200-6-6-06(6)(b)</td>
<td>Basic Services</td>
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<td></td>
<td>(G)</td>
<td>Pharmaceutical Services.</td>
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<td></td>
<td>(b)</td>
<td>Such cabinets or drug rooms shall be kept securely locked when not in use, and the key must be in the possession of the supervising nurse or other authorized persons.</td>
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<td>This Rule is not met as evidenced by:</td>
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<td>This is a Pending Type C Penalty #7.</td>
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<td>Tennessee Code Annotated 68-11-804(c)(7): All internal and external medications and preparations intended for human use shall be stored separately. They shall be properly stored in medicine compartments, including cabinets on wheels, or drug rooms. Such cabinets or drug rooms shall be kept securely locked when not in use, and the key must be in the possession of the supervising nurse or other authorized persons on duty.</td>
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<td>Based on policy review, observation and interview it was determined the facility failed to ensure that medications were stored in locked compartments when unattended and out of sight of 1 of 12 (Nurse #3) nurses observed during medication administration.</td>
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<td>The findings included:</td>
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<td>Review of the facility's &quot;Storage and Handling of Medication After Leaving Pharmacy&quot; policy documented, &quot;...All medications will be stored in the medication carts or the medication refrigerators on the nursing units until the time they are administered to the resident/patient...&quot;</td>
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<td>Observations on the lower 400 hall on 9/27/11 at 11:50 AM, revealed Nurse #3 walked away from the medication cart into a resident's room, leaving</td>
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1) No residents were affected. Medications were secured.
2) On 09/28/11 the D.O.N. observed medication carts to ensure medications were stored properly.
3) Nurses will be in-serviced regarding the storage of drugs and biologicals in the facility on or before 10/28/11.
4) D.O.N. or designee will do weekly random checks for 3 months to ensure compliance with medication storage. Findings will be reported in the monthly P.I. meeting.

Completion Date: 10/28/11

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packaged medications on top of the medication cart, unattended and out of her sight.

Observations on the lower 400 hall on 9/28/11 at 10:15 AM, revealed Nurse #3 walked away from the medication cart, leaving opened medications unattended and out of her sight on the medication cart.

During an interview in the Minimum Data Set office on 9/28/11 at 10:50 AM, the Director of Nursing (DON) #1 was asked what her expectations are for medications left unattended on the medication cart. DON #1 stated, "I expect the medications to be secured at all times. They [nurses] are not to leave [medications] unattended."

1200-6-6-.06(9)(i) Basic Services

Food and Dietetic Services.

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:
This is a Type C Pending Penalty #22.
Tennessee Code Annotated 68-11-604(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.

Open bag of cornflake crumbs were disposed of immediately on 09/26/11.

Dietary Manager reviewed other open/unused food for proper storage.

Unused portions of food will be stored appropriately as directed in facility policy.

The Dietary Manager in-serviced Staff on proper storage of unused food on 10/14/11 as directed in facility policy.

Dietary Manager will spot-check for future compliance and address as needed.

Meat slicer and blender was cleaned immediately on 09/26/11.

Dietary Manager reviewed other equipment for compliance immediately.

Equipment will be cleaned after each use. Staff will be in-serviced on cleaning equipment and routine cleaning schedule of equipment on 10/19/11 per facility policy.

Dietary Manager will spot-check equipment at random to ensure cleanliness.
<table>
<thead>
<tr>
<th>ID</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
<th>PROVIDER'S PLAN OF CORRECTION</th>
</tr>
</thead>
</table>
| N 767 |     | Based on policy review, observation and interview, it was determined 3 of 7 (Dietary staff #1, 2 and Dietary Manager(DM)) dietary staff members failed to ensure food was prepared or stored under sanitary conditions as evidenced by corn flake crumbs stored in an open bag, meat slicer with food particles on the blade, a blender with food particles on the blade, and follow the handwashing policy. The findings included: Review of the facility's "Handwashing Dietary" policy documented, "...2. Hands must be washed...following contact with any unsanitary surface..." Review of the facility's "Infection Control - Dietary (Food & [and] Nutrition)" policy documented, "...Standard Precautions in Food & Nutrition Services...2. Hands must be washed...before returning to work...Food Handling and Preparation...12. Blenders should be cleaned after each use and inverted to air dry...13...The meat slicer and food chopper should be thoroughly cleaned with soapy water and sanitized after each use...Patient Service: 4. Handwashing with soap and water is required immediately upon returning to dietary department after tray delivery...Garbage and Trash Handling:...4. Hands should be washed after handling trash/garbage..." Review of the facility's "Preparation, Storage and Food Distribution Dietary (Food & Nutrition)" policy documented, "...5. Food is prepared with clean utensils...Blenders are cleaned after each use and inverted to air dry...Meat slicer and food chopper are cleaned with soapy water, sanitized and covered after each use...9. Disposal of..."

| N 767 |     | Continued From page 2               | On 09/28/11, the facility Registered Dietitian instructed Dietary Managers and Dietary staff regarding proper handwashing. The Dietary handwashing policy was followed by staff. On 10/17/11, Dietary staff and Dietary Managers were in-serviced regarding proper handwashing. The Registered Dietitian will perform random observation rounds in the kitchen, and during meal service to ensure compliance with the handwashing policy. |
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garbage and rubbish is done routinely...Hands are washed after handling trash/garbage..."

Observations in the kitchen on 9/26/11 at 12:30 PM, revealed the following on initial tour:

a. Under the blade of the blender was a greenish/yellowish liquid substance
b. Under the blade of the meat slicer was a white colored substance
c. An open box of Corn Flakes crumbs with the internal packaging open

During an interview in the kitchen on 9/26/11 at 12:30 PM, the Dietary Manager (DM) was asked about the initial tour findings. The Dietary Manager stated, "...I think that is possibly okra [in the blender]. I expect the equipment to be washed in the three compartment sink after use...The meat slicer was used last Thursday [September 22, 2011] when we had pork roast...yes, it is dirty...I expect it to be cleaned after use...The corn flake crumb box is open, I expect it to be closed tightly with a twist tie. That is unacceptable..."

Observations in the kitchen on 9/27/11, revealed the following:

a. 10:55 AM, the DM entered the department from the outside back door, walked to the preparation table, opened the lid to the trash can, and walked through the kitchen. The DM did not wash her hands when she entered the department.
b. 11:00 AM, Dietary Staff #2 left the department, returned to the department, donned gloves and prepared food on the tray line. Dietary Staff #2 did not wash her hands when she returned to the department.
c. 11:15 AM, Dietary Staff #1 donned gloves lifted the trash can lid three separate times.
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placed foil wrap in the trash can, proceeded to
the tray of biscuits and used the same gloved
hand to remove the biscuits and place them in a
holding pan.

d. 11:20 AM, Dietary Staff #1 left the dietary
department, returned to the department, did not
wash her hands, moved multiple meal tray carts,
removed cups with ice from the ice cream
freezer, filled the cups with tea and placed the lids
on the cups without washing her hands.

e. 11:36 AM, the DM left the department to
deliver a tray and returned to the department.
interacted with staff on the tray line, and entered
the dry stock room. The DM did not wash her
hands when she returned to the department.

During an interview outside in the storage unit on
9/26/11 at 9:00 AM, the DM was asked what her
expectations were for handwashing in the dietary
department. The DM stated, "...I expect staff to
wash their hands when they enter the department
and after having contact with unsanitary
surfaces."