**NAME OF PROVIDER OR SUPPLIER**
HIDDEN ACRES HEALTH CARE CENTER

**STREET ADDRESS, CITY, STATE, ZIP CODE**
904 HIDDEN ACRES DR
MOUNT PLEASANT, TN 38474

<table>
<thead>
<tr>
<th>(X4) ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>(X5) COMPLETE DATE</th>
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<tbody>
<tr>
<td>N 629</td>
<td>1200-8-6-06(3)(b)8. Basic Services (3) Infection Control. 8. Water pitchers, glasses, thermometers, emesis basins, douche apparatus, enema apparatus, urinals, mouthwash cups, bedpans and similar items of equipment coming into intimate contact with residents shall be disinfected or sterilized after each use unless individual equipment for each is provided and then sterilized or disinfected between residents and as often as necessary to maintain them in a clean and sanitary condition. Single use, resident disposable items are acceptable but shall not be reused.</td>
<td>5/4/10</td>
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This Rule is not met as evidenced by:
Type C Pending Penalty #31

Tennessee Code Annotated 68-11-804(c)31: All nursing homes shall disinfect contaminated articles and surfaces, such as mattresses, linens, thermometers and oxygen tents.

This Rule is not met as evidenced by:

Based on policy review, observation and interview, it was determined the facility failed to ensure safe and aseptic washing of linen by not following the facility's policy by utilizing wash water too low to destroy microorganisms in 2 of 2 washers for 62 of 62 Residents.

The findings included:

Review of the facility's "Laundry/Linen" policy

**OTHER INFORMATION**

N629 Basic Services / Infection Control

The facility shall ensure disinfection of articles and surfaces, such as mattresses, linens, thermometers and oxygen tents.

1. No residents were found to be affected by the alleged practice.

2. All residents have the potential to be affected. All residents' laundry will be washed in water at least 160 degrees to destroy microorganisms.

3. A Ruud Model #RHNG040890947 Tankless Water Heater with a Ruud Main Control #UMC117 digital temp readout has been installed on 5/4/10 servicing only laundry equipment. Employees were instructed on 4/20/10 by Laundry Supervisor on properly recording water temps prior to each load of laundry. A new temperature log has been provided for recording of temps. Water temp is being constantly held at 160 degrees by the new tankless water heater.

4. The Laundry Supervisor and Administrator will monitor temp logs and temp readout regularly to assure continued compliance with 160 degree water temps. Findings will be reviewed by the QI Committee; Laundry Supervisor will report back to QI Committee each month for a 3-month period to report continued compliance. Laundry Supervisor and Maintenance Supervisor will continue to monitor periodically to assure continued compliance of procedures and temps.
N 629
Continued From page 1

documented, "...Wash linen in at least 140-160 [degrees] F [Fahrenheit] water at least twenty-five (25) minutes..."

Observations in the facility's laundry room on 4/20/10 at 9:30 AM, revealed the temperature of hot water to be 119 degrees F when checked by the Laundry Supervisor.

Observations in the facility's laundry room on 4/21/10 at 7:45 AM, revealed the hot water temperature to be 122 degrees F when checked by the Maintenance Manager.

During an interview in the maintenance room, on 4/21/10 at 7:50 AM, the Maintenance Manager stated, "...I turned the temperature up on the hot water heater but this effects the residents' water temperature and I am going to turn the temperature back down now..."

During an interview in the laundry room on 4/21/10 at 9:30 AM, the Laundry Supervisor stated, "...I am going to check the temperature on the hot water in the mornings at the sink, the Maintenance Manager showed me how to do this...

N 727
1200-8-6-.06(6)(b) Basic Services

(6) Pharmaceutical Services.

(b) 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.

This Rule is not met as evidenced by:
N 727

Continued From page 2

Type C Pending Penalty #7

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 then on duty.

This Rule is not met as evidenced by:

Based on policy review, observation and interviews, it was determined the facility failed to ensure proper storage of medications by not removing expired medications from 1 of 4 (Nurses' Station Medication Room) medication storage areas.

The findings included:

Review of the facility's "Storage of Medications" policy documented, "...The facility shall not use discontinued, outdated, or deteriorated drugs or biologics. All such drugs shall be returned to the dispensing pharmacy or destroyed.

Observations in the Nurses' Station Medication Room on 4/20/10 at 8:35 AM, revealed 2 bottles of Fortaz 1 gram medication stored past the expiration date of 3/2010.

During an interview in the Nurse's Station medication room on 4/20/10 at 8:35 AM, Nurse # 3 stated, ",...yes, they [two bottles of Fortaz] are expired."

N 727 Basic Services

The facility shall ensure proper storage of medications.

1. No residents were found to be affected by the alleged practice.

2. All residents have the potential to be affected. All medications have been checked by DON/MedS to ensure that medications are not past the expiration dates.

3. Emergency Back-Up Boxes located in med room are checked nightly by licensed nurses to ensure no medications are stored past the expiration date. Med Carts are checked by RN Supervisor weekly to ensure no medications are served past the expiration date. Pharmacist and/or Pharmacy Med Tech checks med carts, med room, and emergency back-up boxes during facility visits. Report made Monday - Friday by DON/MedS in department head morning meeting to ensure facility is in compliance with proper storage of medications. All licensed nurses involved by DON on 4/21/10 on protocol for returning medications to pharmacy prior to expiration date. The DON spoke with Pharmacy Consultant on 4/20/10 regarding protocol for verifying carts, med room, and back-up boxes to ensure no meds are expired.

4. Pharmacy Consultant/Med Tech and DON will check all meds monthly during pharmacy review. The ADON will monitor emergency boxes' checklist to ensure nurses are checking nightly, and verify nursing staff is checking carts and med room. All findings will be reported to QI Committee. DON will monitor for ongoing compliance

4/21/10
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<tr>
<th>ID</th>
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<th>Summary Statement of Deficiencies</th>
<th>ID</th>
<th>Prefix</th>
<th>Tag</th>
<th>Provider's Plan of Correction</th>
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<td>N 727</td>
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<td>During an interview in the hall beside the Director of Nursing's (DON) office on 4/20/10 at 9:15 AM, the DON stated, &quot;...Nurses&quot; are responsible for checking expiration dates of medications.</td>
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