N 645 1200-8-6-.06(3)(k) Basic Services

(3) Infection Control.

(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.

This Rule is not met as evidenced by:

Type C Pending Penalty #19

Tennessee Code Annotated 68-11-804(c)19

The nursing home shall be clean, sanitary and good repair at all times.

Based on observation and interview, it was determined the facility failed to ensure the environment was clean, sanitary and odor free in 1 of 3 (North hall men’s shower room) shower rooms.

The findings included:

Observations of the North hall men’s shower room on 7/8/13 at 11:00 AM and 3:00 PM, on 7/9/13 at 9:45 AM and on 7/10/13 at 3:35 PM, revealed urine and foul odors and missing caulking around the base of the commode.

During an interview in the east hall on 7/10/13 at 3:45 PM, the Director of Housekeeping stated, "There is an odor problem in that [men’s] shower room..."

During an interview in the conference room on 7/10/13 at 4:15 PM, the Administrator stated, "We..."

N 645

F371

Monitoring

Department managers and Dietician observation findings will be reported to the PI team monthly for any needed interventions or recommendations monthly for three months or until compliance reached for covering of all food items from kitchen and proper hand hygiene during meal pass. Frequency of audits and monitoring may decrease to quarterly or as deemed appropriate by committee after substantial compliance has been achieved for three consecutive months. PI committee consists of Medical Director, Administrator, Director of Nursing or ADON, Pharmacy Consultant, MDS Coordinator, Medical Records Clerk, Business Office Manager, Activities Director, Social Services Director, Maintenance Director, Dietary Manager and Director of Housekeeping and Laundry.

8-9-13

Christian Care Center of Springfield believes it’s current practices were in compliance with the applicable standard of care, but that in order to respond to this citation from the surveyors, the facility is taking the following additional actions:
<table>
<thead>
<tr>
<th>ID</th>
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<tr>
<td>N 645</td>
<td>Continued From page 1</td>
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<tr>
<td>N 767</td>
<td>1200-8-8-.06(9)(i) Basic Services</td>
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**N 645**

Continued From page 1

realize there is an odor problem in that [men's] shower room."

**N 767**

1200-8-8-.06(9)(i) Basic Services

(i) Food and Dietetic Services.

(a) 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:

Type C Pending Penalty #22

Tennessee Code Annotated 68-11-804(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.

Based on policy review, observation and interview, it was determined the facility failed to ensure resident food trays were delivered under sanitary conditions as evidenced by food and beverages delivered uncovered down the halls and lack of hand hygiene by staff members during the delivery of meal trays during 2 of 2 (7/8/13 and 7/9/13) dining observations.

The findings included:

1. Dining observations on the west hall on 7/8/13 beginning at 11:55 AM, revealed 14 trays

**Corrective Action for Targeted Residents:**

The facility is providing housekeeping and maintenance services necessary to maintain a sanitary, orderly and comfortable interior for all residents who use the north hall men's shower room. On 7-8-13 a lingering odor was noted in the above mentioned shower room. Staff unable to determine the cause of the odor initially but when deep cleaning around toilet, it was noted to be loose at base which would allow sewer odors to escape into room. Some older tile also noted around base of toilet that could have contributed to odor issue. Tile cleaned by housekeeping supervisor 7/8, 9, 10/13. Toilet tightened and caulked replaced by Maintenance Director the evening of 7-9-13. Bids obtained for replacing floor tile in north hall men's shower room with anticipated completion date of 8-9-13.

**Identification of Other Residents with Potential to be Affected:**

All residents who use facility shower rooms are at risk to be affected by practice therefore education of all housekeeping and maintenance personnel initiated by Administrator 7-10-13 with 100% in-serviced by 7-19-13 on maintaining a sanitary, orderly, and comfortable interior.

**Systematic Changes:**

Plumbing fixtures will be inspected for proper fitting and function by maintenance personnel and documented on Preventive Maintenance Monthly Inspection Checklist and Report.
<table>
<thead>
<tr>
<th>N 767</th>
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<tbody>
<tr>
<td></td>
<td>transported down the hall with uncovered desserts and beverages.</td>
</tr>
<tr>
<td>N 767</td>
<td>Dining observations on the east hall on on 7/8/13 beginning at 12:15 PM, revealed 9 trays transported down the hall with uncovered desserts and beverages.</td>
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<tr>
<td></td>
<td>Dining observations on the north hall on 7/8/13 beginning at 12:30 PM, revealed 19 trays transported down the hall with uncovered desserts and beverages.</td>
</tr>
<tr>
<td></td>
<td>Dining observations on the east hall on 7/8/13 beginning at 5:40 PM, revealed 9 trays transported down the hall with uncovered desserts and beverages.</td>
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<tr>
<td></td>
<td>Dining observations on the north hall on 7/8/13 beginning at 6:00 PM, revealed 19 trays transported down the hall with uncovered desserts and beverages.</td>
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<tr>
<td>2. Dining observations on the west hall on 7/9/13 beginning at 5:25 PM, revealed 13 trays transported down the hall with uncovered desserts and beverages.</td>
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<td>During an interview in the Dietary Manager’s office on 7/9/13 at 6:16 PM, the Certified Dietary Manager (CDM) was asked about the procedure for delivering trays to residents’ rooms. The CDM stated, “...Once the tray cart is delivered to the hall... they [staff] are allowed to take it from the cart to the room on the hall... if they [staff] have to take it further than on that hall they have to cover everything with the plastic wrap that is on the coffee cart... We don’t have a policy for delivering trays.”</td>
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<td>N645</td>
<td>8-9-13</td>
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<td>Monitoring:</td>
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<td>Findings of Preventive Maintenance inspections will be reported to the facility’s Performance Improvement (PI) Committee monthly for three months. If findings are within an acceptable threshold for a period of three months, the frequency of PI monitoring may be reduced to quarterly or per recommendations of the PI Committee. PI committee consists of Medical Director, Administrator, Director of Nursing or ADON, Pharmacy Consultant, MDS Coordinator, Medical Records Clerk, Business Office Manager, Activities Director, Social Services Director, Maintenance Director, Dietary Manager and Director of Housekeeping and Laundry.</td>
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<td>N767</td>
<td>8-2-13</td>
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<td>Corrective Action for Targeted Residents: Facility will ensure practices to distribute and serve food under sanitary conditions. Administrator advised Certified Dietary Manager that all desserts and beverages must be covered before leaving kitchen effective 7-10-13. Occupational Therapist #1 and Social Worker were re-educated on hand washing policy related to assisting with meal tray delivery 7-15-13.</td>
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N 767. Continued From page 3

During an interview at the front nurses' station on 7/10/13 at 7:45 AM, the Administrator was asked why beverages and desserts were transported from the food cart down the hall to residents' rooms without covers and why saran wrap was on the beverage cart. The Administrator stated, "...we were under the impression that we could transport on the same hall without covers, but if we took a tray off the unit the transport cart is on to another hall then it had to be covered... we even looked for a policy that said what distance the tray could be transported without being covered and we don't have one..."

During an interview on the east hall on 7/10/13 at 9:00 AM, the Administrator, stated, "...We thought that the carts were considered the covers... the trays come out to the hall on the cart, and then they take them to the room straight from the cart.... We thought that was all right..."

3. Review of the facility's "Hand Washing" policy documented,"...All employees shall utilize proper hand washing for each of the following conditions... Before preparing or serving food... After attending to your own personal body functions, such as use of toilet, wiping the nose, smoking or combing hair..."

Observations in the kitchen hall on 7/8/13 at 11:36 AM, Occupational Therapist #1 took a tray from the kitchen staff without washing her hands.

Observations on the east hall on 7/9/13 at 5:25 PM, the Social Worker touched her hair, obtained a tray from the cart, handed the tray off to another staff member, reached into the cart and obtained another tray, touched the drink cart, set the tray down, touched an overbed table, pulled the drink cart down the hall and then washed her hands.

Identification of Other Residents with Potential to be Affected:
All residents who receive a tray have potential to be affected by this practice. In-service provided for dietary employees that beginning at 11 a.m. 7-10-13 all items on each tray must be covered before leaving dietary department. 100% of dietary staff trained on change in procedure by 7-12-13. Multi-departmental re-education on hand hygiene by staff members during the delivery of meal trays provided by ADON beginning 7-10-13 verbally with written documentation of in-services completed 8-2-13.

Systematic Changes:
Dietary staff has been educated on change in tray set up procedure so that all items on resident's trays are covered prior to leaving the dietary department. This will now be a part of dietary orientation for new employees as well and monitored by department managers that assist with daily meal tray delivery and by Dietician during monthly audits of meal delivery at facility.

Monitoring
Department managers and Dietician observation findings will be reported to the PI team monthly for any needed interventions or recommendations monthly for three months or until compliance reached for covering of all food items from kitchen and proper hand hygiene during meal
N 767  Continued From page 4

with gel.

During an interview in the conference room on 7/10/13 at 9:55 AM, the Director of Nursing (DON) was asked what the policy is for handwashing during meal tray delivery. The DON stated, "They [staff] should wash their hands with gel if they actually touch a resident..." The DON was then asked what if the staff touch their hair while serving trays. The DON stated, "Then they should wash their hands..."