### Summary Statement of Deficiencies

<table>
<thead>
<tr>
<th>ID PREFIX</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID PREFIX</th>
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<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETE DATE</th>
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<tr>
<td>N727</td>
<td>1200-8-6-.06(6)(b)</td>
<td>Basic Services &lt;br&gt;(6) Pharmaceutical Services. &lt;br&gt;(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. &lt;br&gt;This Rule is not met as evidenced by: Type C Pending Penalty #7 &lt;br&gt;Tennessee Code Annotated 68-11-804(c): 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. Poisons or external medications shall not be stored in the same compartment and shall be labeled as such. &lt;br&gt;Based on policy review, observation and interview, it was determined the facility failed to ensure internals and externals medications were stored separately in 1 of 12 (2nd floor supply room) medication storage areas. &lt;br&gt;The findings included: &lt;br&gt;Observations in the 2nd floor supply room on 7/3/13 at 4:45 PM, revealed externals and internals stored together on the same shelf. Some of the items stored together were Cranberry extract, Vitamin E, Fleet enema, Alcohol pads, Sani pads and Fish oil.</td>
<td>N727</td>
<td>8/1/13</td>
<td>1. The external and internal medications in the second floor supply room were separated on 7/5/13 by ADON. The central supply clerk was re-educated regarding maintaining the presence of a licensed nurse when present in areas that contain medications on 7/15/13 by the DON. &lt;br&gt;2. An audit of medication storage rooms regarding the storage of external and internal medications was conducted on 7/5/13 by the ADON. Medications and supplies were separated at that time. Beginning the week of 7/14/13, an observation of the central supply clerk, in his/her working environment will be conducted by the DON or Designee to ensure a licensed nurse is present when working in areas that contain medications. Negative issues identified will be addressed at that time. &lt;br&gt;3. The licensed nurses were re-educated regarding the storage of internal and external medications on 7/15/13 by the DON and pharmacy consultant. Beginning the week of 7/14/13 the licensed nurses will be re-educated regarding the inability to allow...</td>
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**N 727**: Continued From page 1

During an interview in the 1st floor conference room on 7/3/13 at 5:10 PM, the Director of Nursing (DON) was asked if it was acceptable to store externals and internals together? The DON stated, "What do you mean external and internal? Oh, over the counters... not on the same shelf..."

**N 767** 1200-8-6-.06(9)(i) Basic Services

*(i)* 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:
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 observation and interview, it was determined the facility failed to ensure 2 of 2 (Dietary staff members #1 and #2) dietary staff members prepared, stored and served food under sanitary conditions by failing to cover facial hair; clean the thermometer after testing the temperature of each food and failed to ensure kitchen equipment such as the meat slicer was thoroughly cleaned.

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unattended, non-licensed personnel in areas where medications are stored by the DON or Designee.

4. Audits of the medication storage areas with regards to the storage of internal and external medications will be conducted by the DON or Designee weekly for four weeks, then monthly of two months. Random observations of the central supply clerk, in his/her working environment will be conducted by the DON or Designee weekly for four weeks, then monthly for two months to ensure the presence of a licensed nurse when working in areas where medications are stored.

Findings from the audits will be presented to and reviewed by the QAPI Committee monthly for three months. Further recommendations will be made at that time, as needed. The DON is responsible for continued monitoring and compliance.

Compliance Date: 8/1/13

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1. Dietary staff #1 was re-educated by the Dietary Manager (DM) on 7/1/13 on
The findings included:

1. Observations in the 1st floor dining room on 7/1/13 at 11:39 AM, revealed Dietary staff member #1 serving lunch from the chaffing trays. Dietary staff member #1 was not wearing a beard cover over his mustache and beard.

Observations in the kitchen on 7/2/13 at 3:37 PM, revealed Dietary staff member #1 was walking around the kitchen without a beard cover.

Observations in the kitchen on 7/2/13 at 5:20 PM, revealed Dietary staff member #1 was loading food onto carts for the 1st and 2nd floor without a beard cover.

During an interview in the kitchen on 7/3/13 at 8:36 AM, the Dietary Manager was asked if the facility had a policy for using beard covers. The Dietary Manager stated, "We have beard covers and they should be worn." When informed that Dietary Staff #1 was observed not wearing a beard cover, she stated, "I never noticed that [named dietary staff member #1] had facial hair..."

2. Observations in the 1st floor dining room on 7/2/13 at 5:58 PM, revealed Dietary staff member #2 took food temperatures without cleaning the thermometer between each food.

3. Observations in the kitchen on 7/3/13 at 8:30 AM, revealed residue behind the blade of the meat slicer.

During an interview in the kitchen on 7/3/13 at 8:30 AM, the Dietary Manager verified the meat slicer had residue behind the blade.

wearing a beard cover while working in the kitchen and while serving food. Dietary staff #2 was re-educated by the DM on 7/2/13 on how to properly take food temperatures, cleaning the thermometer between each food item checked. Dietary staff were re-educated by the DM on 7/3/13 on cleaning kitchen equipment, including the meat slicer.

CNA #2, #4, #1, and #5 were re-educated on hand washing procedures by the SDC on 7/15/13.

2. Beginning the week of 7/14/13 the DM will conduct an audit regarding the wearing of beard covers, the cleansing of the thermometer between different foods, and the cleaning of kitchen equipment. The audit will be completed by 7/21/13. Negative issues identified, if any will be addressed at that time.

Beginning the week of 7/14/13, the DON or Designee will conduct an audit regarding hand sanitization during meal service. The audit will be completed by 7/21/13. Negative issues identified, if any will be addressed at that time.

3. The DM re-educated the dietary staff regarding the covering of facial hair,
cleansing the thermometer between foods, and the cleaning of kitchen equipment on 7/3/13.

Beginning the week of 7/14/13, the SOC will re-educate the nursing staff regarding the sanitization of hands during meal service. The re-education will be completed by 7/21/13.

4. Beginning the week of 7/21/13, the DM will conduct three audits regarding the covering of facial hair, the cleansing of the thermometer between foods, and the cleaning of kitchen equipment weekly for four weeks, then monthly for two months. Beginning the week of 7/21/13 the DON or Designee will conduct three audits regarding the sanitization of hands during meal service weekly for four weeks, then monthly for two months.

Findings from the audits will be presented to and reviewed by the QAPI Committee monthly for three months. Further recommendations will be made at that time, as needed. The Nursing Home Administrator will be responsible for dietary monitoring and compliance and the DON is responsible for nursing monitoring and compliance.

Compliance Date: 8/1/13