F 246: 483.15(e)(1) REASONABLE ACCOMMODATION OF NEEDS/PREFERENCES

A resident has the right to reside and receive services in the facility with reasonable accommodations of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered.

This REQUIREMENT is not met as evidenced by:
Complaint #TN00026567

Based on medical record review, observation and interview, it was determined the facility failed to provide services with reasonable accommodation of individual needs and preferences for 1 of 24 (Resident #3) sampled residents.

The findings included:

Medical record review for Resident #3 documented an admission date of 1/15/10 with diagnoses of End Stage Renal Disease, Hypertension, Diabetes and Peripheral Vascular Disease. The social progress notes dated 10/8/10 documented, "...SW [social worker] followed up with resident's dentures..." There was no other documentation for follow-up of the dentures.

During an interview in Resident's #3 room on 3/7/11 at 4:45 PM, Resident #3 stated, "...My 'teeth' [dentures] were flushed down the toilet by my former roommate. A dentist came here about a year ago, took an impression of my mouth, and I still don't have my teeth. We [Resident #3 and her son] paid him [dentist] $500 up front. I haven't..."

1. Residents will receive reasonable accommodation of individual needs and preferences. 4-8-11
2. Denture fitting the mold for permanent dentures was performed on 3-11-11 for delivery of dentures on 3-23-11. 3-11-11
3. Dental services contractor has been changed to new vendor. 3-11-11
4. Social Services will report weekly on monday or friday to Performance Improvement Meeting with department managers regarding status of dental provider care delivery and outstanding services to any resident. Monitored by Administrator 4-8-11
5. A recording log for services by the dental provider has been implemented and will be maintained by Social services reporting to monthly Quality Assurance meeting monitored by Director of Nursing to report outstanding dental services for dentures. 3-11-11

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are discloseable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are discloseable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.
Continued from page 1
heard from this dentist. I can't eat good without my teeth..."

During an interview in the group meeting on 3/8/11 at 10:00 AM, Resident #3 stated, "My dentures have not been replaced... dentist hasn't come since October of 2010...

Observation in Resident #3's room on 3/7/11 at 4:45 PM, revealed Resident #3 did not have bottom or top teeth.

Observation in the middle hall on 3/8/11 at 8:00 AM, revealed Resident #3 sitting in an electric wheelchair, on his way to the dining room. Resident #3 stated, "I don't eat breakfast, I just drink an Ensure."

Observation and interview in Resident's #3's room on 3/8/11 at 4:30 PM, revealed Resident #3 eating pizza. Resident #3 stated, "I have a hard time eating without my teeth."

During an interview in the employee's break room on 3/9/11 at 2:55 PM, the Administrator was asked if she had knowledge of Resident's #3 dental concerns. The Administrator stated, "...I am aware that the resident is private pay and [named dentist] has the dentures ready..." The Administrator was asked what responsibility the facility has toward residents with lost dentures. The Administrator stated, "...The teeth are ready, so you [state] want me to fork over a thousand dollars for his teeth... I have documentation of this [dental follow-ups] in QA [quality assurance] and my private files..." The facility was unable to produce any documentation of dental appointments or follow-ups.

F 250  483.15(g)(1) PROVISION OF MEDICALLY F 250
F 250 Continued From page 2

SS=D RELATED SOCIAL SERVICE

The facility must provide medically-related social services to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

This REQUIREMENT is not met as evidenced by:
Based on review of the social services job description, medical record review, observation, and interview, it was determined the facility failed to provide medically related social services to attain or maintain residents physical, mental and psychosocial well being by not providing denture care for 1 of 24 (Resident #3) sampled residents.

The findings included:

Review of the facility’s “JOB DESCRIPTION: SOCIAL SERVICES” documented “Establish a close, working relationship with the patient in order to assist the patient, as well as to identify any difficulty in adjustment to facility. Assess strengths and weaknesses of the patient in order to more adequately plan for with the patient. Communicate with the family regarding progress, plans, or problems involving the patient. Help family over the difficult period of admission and adjustment toward the resolution of any guilt feelings the family may be experiencing. The person holding this position is delegated the responsibility for carrying out the assigned duties and responsibilities in accordance with current existing federal and state regulations and established company policies and procedures.”

1. Facility will provide medically-related social services to attain or maintain the highest practicable, physical, mental and psychosocial well-being of each resident.

2. Social Worker documented status of Resident #3 dentures upon visit of dental provider on 3-11-11

3. All residents with pending denture services will be documented as to the status of dentures and completion of dentures with communication and anticipated return of dentures.

4. Dental provider has been changed to new dental provider

5. Dental vendor will arrange visits with nursing secretary and social services to be on site every sixty days.

Monitored by Director of Nursing and Administrator
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<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
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<th>PROVIDER'S PLAN OF CORRECTION</th>
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| | | | Review of the social service progress notes dated 10/8/10 documented, "...SW [social worker] followed up with resident's dentures... will
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

NAME OF PROVIDER OR SUPPLIER
CLAIBORNE AND HUGHES HLTH CNTR

CLAIORNE AND HUGHES HLTH CNTR

STREET ADDRESS, CITY, STATE, ZIP CODE
200 STRAHL STREET
FRANKLIN, TN 37064

D A T E 03/09/2011

 statement of deficiencies
(plx): MULTIPLE CONSTRUCTION
A. BUILDING
B. WING
C. LOCATION

445157

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

ID
PREFIX
TAG
ID
PREFIX
TAG

F 250
Continued From page 4

F 250

continue following up with resident's status
[dentures]..." There were no further
documentation regarding Resident #3's dentures.

During an interview in the employee's break room
on 3/9/11 at 11:55 AM, the Patient Advocate was
asked who follows up with dental issues. The
Patient Advocate stated, "...the social worker...

During an interview in the employee breakroom
on 3/9/11 at 12:00 PM, the Social Worker, was
asked about interventions for residents needing
dentures. The Social Worker stated, "...we
change their diet to puréed..."

F 354
483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR,
PALATABLE/PREFER TEMP

F 364

Each resident receives and the facility provides
food prepared by methods that conserve nutritive
value, flavor, and appearance, and food that is
palatable, attractive, and at the proper
temperature.

This REQUIREMENT is not met as evidenced by:
Based on the group interview and observation, it
was determined the facility failed to ensure that
foods were served appealing and palatable for 1
of 2 (Dinner 3/7/11) dining observations.

The findings included:

Review of the facility's "[Name of] Corporate
Dietitians' menu for dinner on 3/7/11
documented, "...Seafood Gumbo, Paptika Rice,
House Salad, Hush puppies..." Review of the
Recipe for Seafood Gumbo (Fish and Shrimp)
documented meat ingredients of fish, shrimp and

1. Residents will receive and
facility provide food prepared
by methods that conserve
nutritive value, flavor, and
appearance; and food that is
palatable, attractive, and at the
proper temperature.

2. Menu item seafood gumbo,
rice hush puppies, and salad is
replaced by white chicken
chilli, pimento cheese
sandwich, fruit salad.

3. Menus will be reviewed with
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<th>Summary Statement of Deficiencies</th>
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<th>Provider's Plan of Correction</th>
<th>Completion Date</th>
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<tbody>
<tr>
<td>F 364</td>
<td>Continued From page 5 sausage.</td>
<td>Observations in the main dining room on 3/7/11 at 5:45 PM, revealed supper trays were served to the residents. The meal consisted of two small dark brown hard looking hush puppies, rice, gravy with onion and peppers with no meat. The residents requested meat. None of the resident were observed eating the hush puppies.</td>
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<td>During the group meeting in the main dining room on 3/8/10 at 10:00 AM, 15 of 15 alert and oriented residents said the food was not good.</td>
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<td>During an interview in the employee break room on 3/9/11 at 4:23 PM, the Certified Dietary Manager (CDM) for the kitchen and the CDM for clinical confirmed that they did have concerns about the evening meal on 3/7/11.</td>
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<td>resident council upon implementation.</td>
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<td>4. Seasonal menu changes will consider local and regional food preferences. Corporate menus will be altered to adapt for regional preferences by reviewing with resident council and residents who wish to have input via the facility survey performed by Patient Family Advocate at least quarterly. Monitored by Dietary Manager, and Clinical Dietary Manager</td>
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<td>5. Performance Improvement meeting held on mondays and fridays will track return of trays and meal acceptance via Dietary Manager reporting any meal with more than 10% trays or food portions returned at 100% and request changes to any meal not substantially consumed. Substantially being defined as less than 15% consumed of 10 trays of any one item. Monitored by Administrator and CDM</td>
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