

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445238	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/28/2022
NAME OF PROVIDER OR SUPPLIER Life Care Center of Tullahoma		STREET ADDRESS, CITY, STATE, ZIP CODE 1715 N Jackson St Tullahoma, TN 37388	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on facility policy review, medical record review, observation and interview, the facility failed to provide a clean and homelike environment for 2 residents (Residents #370 and #1) of 10 resident rooms observed for homelike environment.</p> <p>The findings include:</p> <p>Review of the facility policy titled Keeping a Resident's Room in Order, dated 7/28/2022, showed .resident has a right to a safe, clean .homelike environment .Housekeeping .services necessary to maintain a sanitary .interior .Place frequently used items within resident' [resident's] reach .water cups should be within reach .</p> <p>Resident #370 was admitted to the facility on [DATE] with diagnoses including Aftercare Following Joint Replacement Surgery, Depression, and Anxiety Disorder.</p> <p>During an observation and interview on 9/26/2022 at 9:31 AM, in Resident #370's room, the resident stated concerns about the cleanliness of the bathroom. Observation of the bathroom revealed a dirty drinking glass on a shelf above the sink, dirty linen hung over the edge of the sink, dirty linen was on the floor, a brown dried substance on the toilet seat, and the garbage from the waste container overflowed onto the floor.</p> <p>Resident #1 was admitted to the facility on [DATE] with diagnoses including Surgical Aftercare Following Surgery on the Skin, Unspecified Dementia, and Hypertensive Heart and Chronic Kidney Disease.</p> <p>During an observation and interview in Residents #1 and #370's bathroom on 9/26/2022 at 10:24 AM, LPN #1 confirmed there was a dirty drinking glass on a shelf above the sink, dirty linen hung over the edge of the sink and in the floor, feces on the toilet seat, and the garbage from the waste container overflowed onto the floor.</p> <p>During an observation and interview on 9/26/2022 at 10:27 AM, the Infection Preventionist confirmed a sanitary and homelike environment had not been maintained in Resident #1 and Resident #370's bathroom.</p> <p>During an interview on 9/26/22 at 10:30 AM, Resident #1 stated the bathroom in the room was .terribly unclean .</p> <p>(continued on next page)</p>		

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 disclosable 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 disclosable 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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	During an interview on 9/28/2022 at 10:08 AM, the Housekeeping Supervisor stated housekeepers were expected to clean every resident room and bathrooms daily. The Certified Nursing Assistants (CNA)s should remove dirty linen from the room and place in the appropriate receptacle. The nurses and CNAs were expected to do light cleaning when necessary to maintain a clean environment in resident rooms.		

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<p>F 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on facility policy, medical record review and interview, the facility failed to refer 2 residents (Residents #67 and #50), of 8 residents reviewed for Pre-admission Screening and Resident Review (PASRR), to the state-designated authority for a Level II PASRR after the residents were identified with new mental health diagnoses.</p> <p>The findings include:</p> <p>Review of the facility policy titled Pre-admission Screening and Resident Review [PASRR] dated 8/7/2021, showed .requires that .applicants .be evaluated for a serious mental disorder .be offered the most appropriate setting .Referring all level II residents and all residents with newly evident or possible serious mental disorder .A negative Level I screen permits admission to proceed and ends the .process unless a possible serious mental disorder .arises later .</p> <p>Resident #67 was admitted to the facility on [DATE] with diagnoses including Major Depressive Disorder and Anxiety. A diagnosis of Borderline Personality Disorder was added on 2/26/2020 and a diagnosis of Schizoaffective Disorder on 6/29/2020.</p> <p>Review of a Notice of PASRR Level I Screen Outcome dated 5/20/2020, showed Resident #67's screening diagnoses included Major Depression, Anxiety Disorder, and Unspecified Mood Affective Disorder.</p> <p>Review of the annual MDS assessment dated [DATE], showed Resident #67 was cognitively intact and had diagnoses including Anxiety Disorder, Depression, Schizophrenia, and Borderline Personality Disorder.</p> <p>During an interview on 9/27/2022 at 2:05 PM, the MDS Coordinator confirmed a new PASRR had not been submitted to the state-designated authority for Resident #67 after a diagnosis of Schizoaffective Disorder had been added on 6/29/2020.</p> <p>Review of a PASRR Level I for Resident #50 dated 7/22/2021 prior to admission to the facility showed diagnoses of Dementia and Neurocognitive Disorder.</p> <p>Resident #50 was admitted to the facility on [DATE] with diagnoses including Dementia, Neurocognitive Disorder, Schizophrenia, Major Depressive Disorder, and Anxiety Disorder.</p> <p>During an interview on 9/27/2022 at 12:28 PM, the Minimum Data Set (MDS) Nurse confirmed a new PASRR had not been submitted to the state-designated authority for Resident #50 when the resident was admitted to the facility with diagnoses of Schizophrenia, Major Depressive Disorder, and Anxiety Disorder.</p>		