

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 445110	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/12/2025
NAME OF PROVIDER OR SUPPLIER Nhc Healthcare, Cookeville		STREET ADDRESS, CITY, STATE, ZIP CODE 815 South Walnut Avenue Cookeville, TN 38501	

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 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** 50480</p> <p>Based on facility policy review, medical record review, and interview, the facility failed to resubmit a Pre-Admission Screening and Resident Review (PASARR) timely after a new mental health diagnosis for 3 residents (Residents #43, #47, and #69) of 11 residents reviewed for PASARR.</p> <p>The findings include:</p> <p>Review of the facility's policy titled, Pre-admission Screening and Resident Review (PASRR), revised on 11/2016, revealed .Center should refer any patient for Level II resident review upon a significant change in status/ condition such as newly evident or possible serious mental disorder, intellectual disability or a related condition .</p> <p>Review of the medical record revealed Resident #43 was admitted to the facility on [DATE] with diagnoses including Dementia, Right Leg Fracture, and Insomnia.</p> <p>Review of a PASARR Level 1 screen outcome for Resident #43 dated 7/14/2023, revealed the resident had 1 mental health diagnosis which included Adjustment Disorder.</p> <p>Review of the medical record revealed Resident #43 was diagnosed with a new mental health condition of Delusional Disorder on 4/16/2024.</p> <p>Review of a quarterly Minimum Data Set (MDS) assessment for dated 9/3/2024, revealed Resident #43 scored a 5 on the Brief Interview for Mental Status (BIMS) assessment which indicated the resident had severe cognitive impairment. Further review of the quarterly MDS assessment revealed Resident #43 had psychiatric and mood conditions which included Anxiety Disorder, Depression, and Psychotic Disorder.</p> <p>Review of the medical record revealed Resident #43 was diagnosed with a new mental health condition of Major Depressive Disorder on 12/3/2024.</p> <p>Review of the medical record revealed Resident #43 was diagnosed with a new mental health condition of General Anxiety Disorder on 1/24/2025.</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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<p>F 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of a Psychiatric Nurse Practitioner note for Resident #43 dated 1/24/2025, revealed the resident was seen for management of mental health conditions which included Anxiety, Depression, and Delusional Disorder.</p> <p>Review of the medical record revealed a new PASARR for Resident #43 was not submitted after the mental health diagnoses of Delusional Disorder, Major Depressive Disorder, Generalized Anxiety Disorder, or Psychotic Disorder was added.</p> <p>Review of the medical record revealed Resident #47 was admitted to the facility on [DATE] with diagnoses including Dementia, Rib Fractures, Falls, and Heart Disease.</p> <p>Review of a PASARR Level 1 screen outcome for Resident #47 dated 3/24/2023, revealed the resident did not have a substance related abuse or dependency disorder.</p> <p>Review of a quarterly MDS assessment dated [DATE], revealed Resident #47 scored a 5 on the BIMS assessment which indicated the resident had severe cognitive impairment. Further review of the quarterly MDS assessment revealed the resident received medications of high-risk drug classes which included Antipsychotic, Antidepressant, and Opioid.</p> <p>Review of the medical record revealed Resident #47 was diagnosed with 2 new mental health conditions of Psychoactive Substance Dependency and Opioid Dependency on 1/7/2025.</p> <p>Review of a Nurse Practitioner Note for Resident #47 dated 1/7/2025, revealed the resident was seen for management of mental health conditions which included Psychoactive Substance Dependency and Opioid Dependency.</p> <p>Review of the medical record revealed a new PASARR for Resident #47 was not submitted after the new mental health conditions of Psychoactive Substance Dependency and Opioid Dependency was added.</p> <p>Review of the medical record revealed Resident #69 was admitted to the facility on [DATE] with diagnoses including Dementia, Senile Degeneration, Adult Failure to Thrive, and Kidney Disease.</p> <p>Review of a PASARR Level 1 screen outcome for Resident #69 dated 11/4/2022, revealed the resident did not have a mental health condition. Further review of the PASARR Level 1 screen outcome revealed the resident did not have a substance related abuse or dependency disorder.</p> <p>Review of the medical record revealed Resident #69 was diagnosed with a new mental health condition of Adjustment Disorder on 1/16/2023.</p> <p>Review of the medical record revealed Resident #69 was diagnosed with a new mental health condition of Delusional Disorder on 10/5/2023.</p> <p>Review of the medical record revealed Resident #69 was diagnosed with 2 new mental health conditions of Psychoactive Substance Dependency and Opioid Dependency on 8/6/2024.</p> <p>(continued on next page)</p>

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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>Review of a significant change MDS assessment dated [DATE], revealed Resident #69 scored a 14 on the BIMS assessment which indicated the resident was cognitively intact. Further review of the significant change MDS revealed the resident had psychiatric and mood disorders which included Anxiety Disorder and Psychotic Disorder. The significant change MDS also revealed the resident received medications of high-risk drug classes which included Antianxiety and Opioid medications.</p> <p>Review of the medical record revealed Resident #69 was diagnosed with a new mental health condition of General Anxiety Disorder on 1/21/2025.</p> <p>Review of the medical record revealed a new PASARR for Resident #69 was not submitted after the new mental health diagnoses of Generalized Anxiety Disorder, Delusional Disorder, Psychoactive Substance Dependency, and Opioid Dependency was added.</p> <p>Review of a Nurse Practitioner Note for Resident #69 dated 1/25/2025, revealed the resident was seen for management of mental health conditions which included Adjustment Disorder, Delusional Disorder, Psychoactive Substance Dependency, Opioid Dependency, and General Anxiety Disorder.</p> <p>During a record review and interview on 2/11/2025 at 2:40 PM the Assistant Director of Nursing (ADON) stated the Level 1 screen outcomes which included Resident #43 dated 7/14/2023, Resident #47 dated 3/24/2023, and Resident #69 dated 11/14/2023 were the most recent referrals to the state designated PASARR agency. During further interview the ADON confirmed the facility failed to refer Resident #43, Resident #47, and Resident #69 to the state designated agency for PASARRS after identifying new mental health conditions.</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49568</p> <p>Based on facility policy review, medical record review, observations, and interviews, the facility failed to develop a person-centered comprehensive care plan related to hospice services for 1 resident (Resident #75) and for dental issues for 1 resident (Resident #85) of 19 residents reviewed for care plans.</p> <p>The findings include:</p> <p>Review of the facility's policy titled, SECTION VII: PATIENT CARE PLANS, dated 11/2023, revealed . services outlined in the comprehensive care plan meet .standards of quality .Problems are patient conditions . Care plans are updated as needed .New problems are handled as they arise .are to be added to the current care plan .</p> <p>Review of the medical record revealed Resident #75 was admitted to the facility on [DATE] with diagnoses including Heart Failure, Atrial Fibrillation, and Chronic Kidney Disease.</p> <p>Review of a quarterly Minimum Data Set (MDS) assessment dated [DATE], revealed Resident #75 scored an 11 on the Brief Interview for Mental Status (BIMS) assessment which indicated the resident had moderate cognitive impairment.</p> <p>Review of the comprehensive care plan for Resident #75 initiated 1/1/2025, revealed the resident did not have a care plan for hospice services.</p> <p>Review of the Physician's Order Summary Report for Resident #75 dated 2/7/2025, revealed .HOSPICE TO EVAL AND TREAT .</p> <p>Review of a facility document titled, Hospice Plan of Care, for Resident #75 dated 2/8/2025, revealed . HOSPICE .CERTIFY THAT THE PATIENT HAS A TERMINAL DIAGNOSIS .PROGNOSIS IS SIX MONTHS OR LESS .</p> <p>Review of a Nurse's Note for Resident #75 dated 2/10/2025, revealed .Sig [significant] change MDS [assessment] set up for admit to hospice services .</p> <p>Review of the medical record revealed Resident #85 was admitted to the facility on [DATE] with diagnoses including Chronic Obstructive Pulmonary Disease, Heart Failure, and Diabetes.</p> <p>Review of the comprehensive care plan for Resident #85 initiated on 8/30/2024, revealed the resident did not have a care plan for dental issues related to broken and missing teeth.</p> <p>Review of a quarterly MDS assessment dated [DATE], revealed Resident #85 scored a 13 on the BIMS assessment which indicated that the resident was cognitively intact.</p> <p>Review of the Physician's Order Summary Report for Resident #85 dated 2/10/2025, revealed .Penicillin [antibiotic medication] 500 mg [milligram] r/t [related to] broken tooth .Four Times A Day .Tramadol [pain relieving medication] .50 mg .Three Times A Day .PRN [as needed] .</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 2/10/2025 at 11:16 AM, Resident #85 stated .I was eating breakfast this morning and tooth broke off and came out . Resident #85 stated .do not have any pain at present .</p> <p>During an interview on 2/11/2025 at 7:45 AM, Resident #85 stated .they are giving her some antibiotics and she has Tramadol for pain and is not in pain at this time .</p> <p>During an interview on 2/12/2025 at 7:30 AM, the Director of Nursing revealed the dentist was coming to the facility to evaluate Resident #85 on 2/13/2025.</p> <p>During an interview on 2/12/2025 at 9:25 AM, the Assistant Director of Nursing (ADON) revealed she was responsible for updating the residents' care plans. The ADON confirmed the care plan had not been developed to include hospice services for Resident #75 and dental issues to include broken with missing teeth for Resident #85.</p>

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39794</p> <p>Based on medical record review, observations, and interviews, the facility failed to properly store refrigerated food items for 1 Resident (Resident #5) of 19 residents observed for a homelike environment related to food storage.</p> <p>The findings include:</p> <p>Review of the medical record revealed Resident #5 was admitted to the facility on [DATE] with diagnoses including Stroke, Difficulty Swallowing, Kidney Disease, and Falls.</p> <p>Review of an annual Minimum Data Set (MDS) assessment dated [DATE], revealed Resident #5 scored a 15 on the Brief Interview for Mental Status assessment which indicated the resident was cognitively intact. Further review of the annual MDS assessment revealed Resident #5 was able to feed herself with staff set up and staff clean up assistance.</p> <p>During an observation on [DATE] at 11:20 AM, revealed Resident #5 was resting in her bed with her eyes closed. Further observation revealed two 4-ounce yogurts which were room temperature and unopened and located on the overbed table.</p> <p>During an interview on [DATE] at 2:37 PM, Certified Nursing Assistant A stated Resident #5 was able to feed herself and open tray items independently which included yogurt containers.</p> <p>During an observation on [DATE] at 7:30 AM, revealed Resident #5 was resting in her bed with her eyes open. Further observation revealed two 4-ounce yogurts which were room temperature and unopened and located on the overbed table.</p> <p>During an interview on [DATE] at 7:35 AM, Resident #5 stated the two 4-ounce yogurts were safe to consume.</p> <p>During an observation and interview on [DATE] at 7:40 AM, in Resident #5's room, Registered Nurse (RN) Supervisor confirmed the two 4-ounce yogurts were .expired . and available for resident use.</p> <p>During an interview on [DATE] at 7:50 AM, the Certified Dietary Manager (CDM) stated the 2 room temperature yogurts would not have hurt the resident if they were consumed. The CDM further stated the yogurt if left unrefrigerated may have a bad taste but would not have likely caused an upset stomach.</p>		