STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	445484	A. Building B. Wing	03/11/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Senator Ben Atchley State Veterans' Home	One Veterans Way Knoxville, TN 37931

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)
F 0644 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on medical record reviews, and interviews, the facility failed to ensure Pre-admission Screening and Resident Reviews (PASARR's) were submitted to the state-designated authority for a Level II evaluation after diagnoses of serious mental illness were identified for 3 residents (Residents #1, #12, and #126) of 4 residents reviewed for PASARR's.The findings include:Review of the medical record revealed Resident #1 was admitted to the facility on [DATE] with diagnoses including Anxiety Disorder, Insomnia, Post-Traumatic Stress Disorder (PTSD), and Recurrent Depression.Review of a PASARR for Resident #1 submitted on 1/25/2026 (prior to admission), revealed the resident had diagnoses of Anxiety Disorder and Mild or Situational Depression, but did not include the diagnoses of Insomnia, and PTSD. The PASARR outcome was .No Level II Required-Level I Negative .Review of the comprehensive care plan dated 1/29/2026, revealed Resident #1 .dx [diagnoses] of other recurrent depressive disorders, insomnia, generalized anxiety disorder and PTSD .Review of an admission Minimum Data Set (MDS) assessment dated [DATE], revealed Resident #1 scored a 14 on the Brief Interview for Mental Status (BIMS) assessment which indicated the resident was cognitively intact. Further review revealed Resident #1 was marked as not having a Level II PASARR for a serious mental illness or related condition.Review of the medical record revealed Resident #12 was admitted to the facility on [DATE] with diagnoses including Dementia without Behavioral Disturbance, Major Depressive Disorder, Adjustment Disorder with Depressed Mood, Delirium, Anxiety Disorder, PTSD, and Nightmare Disorder.Review of a PASARR for Resident #12 submitted on 5/16/2024 (prior to admission), revealed the resident had diagnoses of Dementia/Neurocognitive Disorder and Anxiety Disorder, but did not include the diagnoses of Major Depressive Disorder, Adjustment Disorder with Depressed Mood, Delirium, PTSD, and Nightmare Disorder. The PASARR outcome was .No Level II Required-Level I Negative .Review of an annual MDS assessment dated [DATE], revealed Resident #12 scored a 15 on the BIMS assessment which indicated the resident was cognitively intact. Further review revealed Resident #12 was marked as not having a Level II PASARR for a serious mental illness or related condition.Review of the comprehensive care plan dated 2/3/2026, revealed Resident #12 .dx of delirium . and .Mood/Behavior: I have dx of major depressive disorder, adjustment disorder with depressed mood and anxiety disorder .hx [history] nightmares .Review of the medical record revealed Resident #126 was admitted to the facility on [DATE] with diagnoses including Hallucinations, Major Depressive Disorder, and Other Specified Mental Disorders, Adjustment Disorder with Anxiety, and PTSD. Review of a PASARR for Resident #126 submitted on 11/14/2025, revealed the resident had a diagnosis of Major Depression but did not include diagnoses of Hallucinations, Other Specified Mental Disorders, Adjustment Disorder with Anxiety, and PTSD. The PASARR outcome did not indicate a Level II evaluation was required, with comments including .although this individual has a diagnosis of major depression, there are no indicators identified that would signify the need for further evaluation .Review of a significant change MDS assessment dated [DATE], revealed Resident #126 scored a 14 on the BIMS assessment which indicated the resident was cognitively intact. Further review revealed the resident was marked as not having a Level II PASARR for a (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0644 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	serious mental illness or related condition.Review of the comprehensive care plan dated 2/12/2026, revealed Resident #126 .Hallucinations and major depression noted .PTSD dx per psych [psychiatric services] . During an interview on 3/11/2026 at 4:00 PM, the Director of Nursing (DON) confirmed Resident #1's PASARR did not contain the diagnoses of PTSD, Recurrent Depressive Disorder, and Insomnia; Resident #12's PASARR did not contain the diagnoses of Major Depressive Disorder, Adjustment Disorder with Depressed Mood, Delirium, PTSD, and Nightmare Disorder; Resident #126's PASARR did not contain the diagnoses of Hallucinations, Other Specified Mental Disorders, Adjustment Disorder with Anxiety, and PTSD.During an interview on 3/11/2026 at 4:30 PM, the Registered Nurse/Admissions/Case Manager (RN/ADM) stated, I [RN/ADM] do the PASARR's .the PASARR's for Residents #1, #12, and #126 must have been missed .

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F 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. **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 properly store medication in 3 of 4 medication carts reviewed for medication storage.The findings include:Review of the facility policy titled, MEDICATION STORAGE IN THE FACILITY Storage of Medications, dated 1/2019, revealed .Medications and biologicals are stored safely, securely, and properly, following manufacturer's recommendations or those of the supplier .all medications dispensed from the pharmacy are stored in the container with the pharmacy label .Medication storage areas are kept clean .When the original seal of a manufacturer's container or vial is initially broken, the container or vial will be dated per facility policy .All expired medications will be removed from the active supply and destroyed .Review of the facility policy titled, MEDICATION ADMINISTRATION General Guidelines, dated 1/2019, revealed .Medications are administered as prescribed in accordance with good nursing principles and practices .Medications are administered at the time they are prepared .Medications are administered within 60 minutes of scheduled time .routine medications are administered according to the established medication administration schedule for the facility .During an observation and interview on 3/11/2026 at 1:05 PM, the C-Front medication cart was observed with dried debris in the bottom of the liquid medication storage drawer, and dried debris with a sticky substance on the outside of some liquid medication bottles. Licensed Practical Nurse (LPN) A stated the medication carts were cleaned weekly and as needed. LPN A confirmed the liquid storage drawer and some of the liquid medication bottles were not maintained in a clean condition.Review of the medical record revealed Resident #16 was admitted to the facility on [DATE] with diagnoses including Dementia, Paraplegia, and Hypertension.During an observation and interview on 3/11/2026 at 1:07 PM, the C-Front medication cart revealed a 1-ounce clear medication cup in a drawer, a thick brownish colored substance filled 1/4 of the cup, and the cup was not labeled with a name, date, or time of preparation. LPN A stated the medication cup contained Resident #16's crushed medications mixed with applesauce, which the resident had refused to take on the morning medication pass, and had planned on attemptingg to administer the medication to Resident #16 later. LPN A confirmed the cup of prepared medications was in the medication cart's drawer and was not labeled with the resident's name, date, or time of preparation.Review of the medical record revealed Resident #24 was admitted to the facility on [DATE] with diagnoses including Diabetes Mellitus, Atrial Fibrillation, and Chronic Kidney Disease.Review of the Physician's Orders for Resident #24 dated 2/26/2026, revealed an order for Glargine insulin (also called Lantus - a long-acting injectable medication used to lower blood sugar levels) with directions to inject 30 units subcutaneously (injection into the fatty layer under the skin) two times daily.During an observation and interview on 3/11/2026 at 1:09 PM, the C-Front medication cart revealed a Lantus insulin pen for Resident #24 lying in the drawer, partially used, and was not labeled with an open date. LPN A confirmed the insulin pen was not dated when it was opened.Review of the medical record revealed Resident #87 was admitted to the facility on [DATE] with diagnoses including History of Sinusitis, Dementia, and Hypertension.Review of the Physician's Orders for Resident #87 dated 1/12/2026, revealed an order for Fluticasone Propionate 50 micrograms per actuate (mcg/act) (measured amount in each spray) with directions to give 1 spray into both nostrils in the morning.During an observation and interview on 3/11/2026 at 1:11 PM, the C-Front medication cart revealed a Fluticasone Propionate 50 mcg nasal spray for Resident #87 in a bag lying in the drawer and was not labeled with an open date. LPN A confirmed the nasal spray was not dated when it was opened.During an observation and interview on 3/11/2026 at 1:13 PM, the C-Front medication cart revealed a 100 milliliter (ml) container of Normal Saline 0.9% (percent), with a manufacturer's expiration date of 12/28/2025. LPN A confirmed the Normal Saline container had (continued on next page)

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F 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	expired and was available for resident use.Review of the medical record revealed Resident #5 was admitted to the facility on [DATE] with diagnoses including Diabetes Mellitus, Congestive Heart Failure, and Hypertension.Review of the Physician's Orders for Resident #5 dated 3/2/2026, revealed an order for Lispro insulin (a short-acting injectable medication used to lower blood sugar levels quickly) with directions to inject 10 units subcutaneously before meals and at bedtime.During an observation and interview on 3/11/2026 at 1:30 PM, the C-Back medication cart revealed a Lispro insulin (Humalog) pen lying in the drawer with Resident #5's medications. The insulin pen was partially used, was not labeled with a resident's name or open date, and the pharmacy label was not on the pen. LPN B stated the Lispro insulin pen was Resident #5's and confirmed the insulin pen did not have the resident's name and was not dated when it was opened.Review of the medical record revealed Resident #11 was admitted to the facility on [DATE] with diagnoses including Diabetes Mellitus, Chronic Kidney Disease, and Chronic Respiratory Failure.Review of the Physician's Orders for Resident #11 dated 2/9/2026, revealed an order for Humalog insulin with directions to inject 10 units subcutaneously before meals and at bedtime.During an observation and interview on 3/11/2026 at 1:32 PM, the C-Back medication cart revealed a Lispro insulin pen lying in the drawer with Resident #11's medications. The insulin pen was partially used, was not labeled with a name or open date, and the pharmacy label was not on the pen. LPN B stated the insulin pen was Resident #11's and confirmed the insulin pen did not have the resident's name and was not dated when it was opened.Review of the medical record revealed Resident #3 was admitted to the facility on [DATE] with diagnoses including Rheumatoid Arthritis, Chronic Kidney Disease, and a current Urinary Tract Infection (UTI). During an observation and interview on 3/11/2026 at 1:33 PM, the C-Back medication cart revealed a vial of Ertapenem (injectable antibiotic - medication used to treat certain bacterial infections to include UTI) 1 gram per vial. The vial contained translucent yellow liquid, and was not labeled with a name, date, or time of preparation. LPN B stated the vial of medication had been reconstituted (mixed) earlier in the day. LPN B stated she had planned to administer the medication to Resident #3, but the powder (antibiotic medication) had not dissolved completely. LPN B confirmed the vial of prepared medication was in the medication cart's drawer, and was not labeled with the resident's name, date, or time of preparation.Review of the medical record revealed Resident #61 was admitted to the facility on [DATE] with diagnoses including Diabetes Mellitus, Dementia, and Heart Failure.Review of the Physician's Orders for Resident #61 dated 3/3/2026, revealed an order for Lispro insulin with directions to inject 14 units subcutaneously before meals and at bedtime.During an observation and interview on 3/11/2026 at 1:35 PM, the C-Middle medication cart revealed a Lispro insulin pen for Resident #61 lying in the drawer, partially used, and was not labeled with an open date. LPN C confirmed the insulin pen was not dated when it was opened.Review of the medical record revealed Resident #65 was admitted to the facility on [DATE] with diagnoses including Diabetes Mellitus, Chronic Kidney Disease, and Dementia.Review of the Physician's Orders for Resident #65 dated 2/3/2026, revealed an order for Lantus insulin with directions to inject 32 units subcutaneously twice daily.During an observation and interview on 3/11/2026 at 1:37 PM, the C-Middle medication cart revealed a Lantus insulin pen lying in the drawer with Resident #65's medications. The insulin pen was partially used and was not labeled with a name or open date. LPN C stated the insulin pen was Resident #65's and confirmed the insulin pen did not have the resident's name and was not dated when it was opened.During an interview on 3/11/2026 at 3:00 PM, the Director of Nursing (DON) confirmed the medication cart drawers and liquid medication bottles should be kept clean, and all resident's medications including nasal spray and insulin should be labeled with the resident's name and the date the medication was opened. The DON stated if resident medications were prepared, the medication should be administered promptly within the scheduled time frame, when a resident refuses to take medication, the medication should be discarded, and confirmed prepared medications should not be stored in the medication cart.