| **Statement of Deficiencies** | **(X1) Provider/Supplier/CLIA Identification Number** | **(X3) Date Survey Completed** |
|---|---|---|
| | 883843 | 05/13/2026 |
| **Name of Provider or Supplier** | **Street Address, City, State** | |
| Dickson Medical Associates Mathis Pediatrics | 110 Mathis Drive, Suite 103, Dickson, TN | |

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

| **(X4) ID Prefix Tag** | **Summary Statement of Deficiencies**<br>(Each deficiency should be preceded by full regulatory or LSC identifying information) |
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| **E0004** | Develop EP Plan, Review and Update Annually<br><br>403.748(a), 416.54(a), 418.113(a), 441.184(a), 460.84(a), 482.15(a), 483.73(a), 483.475(a), 484.102(a), 485.68(a), 485.542(a), 485.625(a), 485.727(a), 485.920(a), 486.360(a), 491.12(a), 494.62(a). The [facility] must comply with all applicable Federal, State and local emergency preparedness requirements. The [facility] must develop establish and maintain a comprehensive emergency preparedness program that meets the requirements of this section. The emergency preparedness program must include, but not be limited to, the following elements: (a) Emergency Plan. The [facility] must develop and maintain an emergency preparedness plan that must be [reviewed], and updated at least every 2 years. The plan must do all of the following: * [For hospitals at 482.15 and CAHs at 485.625(a):] Emergency Plan. The [hospital or CAH] must comply with all applicable Federal, State, and local emergency preparedness requirements. The [hospital or CAH] must develop and maintain a comprehensive emergency preparedness program that meets the requirements of this section, utilizing an all-hazards approach. * [For LTC Facilities at 483.73(a):] Emergency Plan. The LTC facility must develop and maintain an emergency preparedness plan that must be reviewed, and updated at least annually. * [For ESRD Facilities at 494.62(a):] Emergency Plan. The ESRD facility must develop and maintain an emergency preparedness plan that must be [evaluated], and updated at least every 2 years. .<br><br>This STANDARD is not met as evidenced by:<br>Based on the Rural Health Clinic's (RHC's) policy review, manual review and interview, the RHC failed to maintain an Emergency Preparedness (EP) plan to be reviewed and updated every two years. The findings included: Review of the RHC's policy, "Emergency Preparedness", dated 4/28/2025, revealed the RHC will develop and maintain and emergency preparedness plan that will be reviewed and updated at least every 2 years. Review of the RHC's EP manual revealed that the RHC did not have an EP plan that was reviewed and updated every two years. During an interview |

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| | on 5/13/2026 at 11:45 AM, the Director of Clinical and Regulatory Compliance (DCRC) stated the EP manual had not been updated. |