

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N105010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/10/2021
NAME OF PROVIDER OR SUPPLIER PARKWAY OPERATOR LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 749 BLAKE STREET EDWARDSVILLE, KS 66111		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	INITIAL COMMENTS The following citations represent the findings of a Health Resurvey. The 2567 was electronically sent to the facility on 06/15/21.	S 000		
S1082 SS=F	26-40-303 (2)(a)(b) P E - Medication room or area (2) Medication room or area. Each resident unit shall have a room or area for storage and preparation of medications or biologicals for 24-hour distribution, with a temperature not to exceed 85°F. This requirement shall be met by one or more of the following: (A) A room with an automatically closing, self-locking door visible from the nurses ' workroom or area. The room shall contain a work counter with task lighting, hand-washing sink, refrigerator, and shelf space for separate storage of each resident ' s medications. The secured medication storage room shall contain separately locked compartments for the storage of controlled medications listed in K.S.A. 65-4107, and amendments thereto, and any other medications that, in the opinion of the consultant pharmacist, are subject to abuse; (B) if the resident unit serves no more than 32 residents, a nurses ' workroom or area equipped with a work counter with task lighting, hand-washing sink, locked refrigerator, and locked storage for resident medications. A separately locked compartment shall be located within the locked cabinet, drawer, or refrigerator for the storage of controlled medications listed in K.S.A. 65-4107, and amendments thereto, and any other medications that, in the opinion of the consultant pharmacist, are subject to abuse;	S1082		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

06/15/21

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S1082	Continued From page 1 (C) a locked medication cart, in addition to a medication room or area, if the cart is located in a space convenient for control by nursing personnel who are authorized to administer medication. If controlled medications listed in K.S.A. 65-4107, and amendments thereto, and any other medications that, in the opinion of the consultant pharmacist, are subject to abuse are stored in the medication cart, the cart shall contain a separately locked compartment for the storage of these medications; or (D) in the resident ' s room if the room contains space for medication preparation with task lighting, access to a hand-washing sink, and locked cabinets or drawers for separate storage of each resident ' s medication. Controlled medications listed in K.S.A. 65-4107, and amendments thereto, and any other medications that, in the opinion of the consultant pharmacist, are subject to abuse shall not be stored in a resident ' s room. This REQUIREMENT is not met as evidenced by: The facility had a census of 37 residents. The sample included 12 residents. Base on observation and interview, the facility failed to have a working faucet/sink in one of one medication room. Findings included: - On 06/07/21 at 02:48 PM, observation during initial tour of the medication room revealed a non-functioning faucet/sink.	S1082		

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S1082	Continued From page 2 On 06/07/21 at 02:48 PM, License Nurse (LN) G stated the faucet/sink did not work and did not know why. LN G also reported she could not remember when it stopped running water from the faucet. On 06/10/21 at 01:30 PM, Administrative Nurse D stated the medication room had housed an automated medication dispenser that had been removed from the facility and thought that was the reason for the faucet being turned off. Administrative Nurse D stated the automated medication dispenser had been removed approximately six months ago and was not aware the faucet did not work. The facility's "Work Orders, Maintenance" policy, dated May 2021, documented maintenance work orders shall be completed in order to establish a priority of maintenance service. The policy further documented it shall be the responsibility of the department directors to fill out and forward such work orders to the maintenance director. Upon request, the facility was unable to provide a policy regarding the medication room. The facility failed to maintain a working faucet/sink in the facility's medication room, placing the residents at risk for receiving contaminated medications and treatments.	S1082		