Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N087033	A. BUILDING: _____ B. WING _____	10/13/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SEDGWICK PLAZA	2455 N WOODLAWN ST WICHITA, KS 67220

(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 the resurvey with investigation of complaint #77396 at the above named facility on 10-1-14, 10-2-14, 10-6-14, 10-7-14 and 10-13-14.	S 000		
S3280 SS=F	26-41-104 (d) Disaster and Emergency Preparedness (d) Each administrator or operator shall ensure disaster and emergency preparedness by ensuring the performance of the following: (1) Orientation of new employees at the time of employment to the facility ' s emergency management plan; (2) education of each resident upon admission to the facility regarding emergency procedures; (3) quarterly review of the facility ' s emergency management plan with employees and residents; and (4) an emergency drill, which shall be conducted at least annually with staff and residents. This drill shall include evacuation of the residents to a secure location. This REQUIREMENT is not met as evidenced by: KAR 26-41-104(d) (1) (3) The facility identified a census of 26 residents. The sample included 3 residents. Based on interviews, record reviews and observation for 1 (#400) non sampled resident and 3 (#A, #B, #C) of 4 personnel records reviewed, the administrator failed to ensure orientation of the facility's Emergency Management Plan (EMP) at the time of new employees employment and	S3280		

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

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S3280	Continued From page 1	S3280		

failed to ensure quarterly review of the facility's emergency management plan with employees and residents.

Findings included:

- On 10-1-14 at 2:30 p.m., Operator provided a copy of the Emergency Disaster Review (EDR) with the month and date (he/she) stated the EDR was reviewed with staff and residents. The Operator was unable to identify the time of the reviews or who attended.

Interview on 10-1-14 at 2:50 p.m. with Resident #400 stated, "(He/She) live here for several years and was not aware of an Emergency Disaster Plan (EDP). The Resident further stated had bad eye sight and no one had reviewed an EDP with (him/her). Resident stated he/she was independent with bathing, dressing, transfer and was own responsible party."

Interview on 10-1-14 at 3:00 p.m. with Certified Staff #A stated (he/she) started to work about three months ago and further stated, "(He/She) did not know anything about an EDP."

Interview on 10-1-14 at 3:05 p.m. with Certified Staff #B stated was not aware of an EDP nor had an in-service for the plan.

Interview on 10-1-14 at 3:07 p.m. with Certified Staff #C stated had worked here for a few months and was not aware of an EDP and had not attended an in-service to review the EDP.

On 10-1-14 at 3:30 p.m., the Operator provided a copy of the Safety Bulletin/Flyer. At the bottom of the flyer recorded Note: " A monthly review of the more prevalent disasters will be delivered to

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S3280	Continued From page 2 your apartments. Should you wish to see the entire plan, please schedule a visit with the Executive Director (Operator). We will also review these bulletins at the monthly Town Hall/Resident Council meetings. " The Operator stated only 4 Residents from Assisted Living attend the Town Hall/Resident Council meetings which is held in Independent Living. The Assisted Living Residents do not have a Town Hall/Resident Council meeting in the Assisted Living facility. For all Residents and facility staff, the administrator failed to ensure orientation of the facility's EMP at the time of new employee ' s employment and failed to ensure quarterly review of the facility's EMP with employees and residents.	S3280		