STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N034001	A. BUILDING: _____ B. WING _____	09/07/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WESTERN PRAIRIE SENIOR LIVING LLC	510 E SAN JACINTO AVENUE ULYSSES, KS 67880

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S 000	INITIAL COMMENTS The following citations represent the findings of a Resurvey for the above named Assisted Living facility conducted on 09/06/22 and 09/07/22.	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)(3) The facility reported a census of seven residents. Based on record review and interview for all facility residents, the administrator failed to ensure disaster and emergency preparedness by ensuring performance of quarterly reviews of the facility's emergency management plan with all residents.	S3280		

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

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S3280	Continued From page 1 Findings include: - On 09/06/22 at 04:29 PM Administrative Staff A brought in a paper with resident names on it dated July 2022. Staff A stated she identified the staff responsible for reviewing the emergency management plan had not been reviewing them, so she did one review and implemented a new plan to get the reviews done. For all residents, the administrator failed to ensure the completion of quarterly reviews of the emergency management plan.	S3280		
S3298 SS=F	26-41-206 (d) Food Preparation (d) Food preparation. Food shall be prepared using safe methods that conserve the nutritive value, flavor, and appearance and shall be served at the proper temperature. (1) Food used by facility staff to serve to the residents, including donated food, shall meet all applicable federal, state, and local laws and regulations. (2) Food in cans that have significant defects, including swelling, leakage, punctures, holes, fractures, pitted rust, or denting severe enough to prevent normal stacking or opening with a manual, wheel-type can opener, shall not be used. (3) Food provided by a resident ' s family or friends for individual residents shall not be required to meet federal, state, and local laws and regulations. This REQUIREMENT is not met as evidenced by:	S3298		

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S3298	Continued From page 2 KAR 26-41-206(d) The facility reported a census of seven residents. The director failed to ensure staff prepared and served food at the proper temperature as evidenced by record review and interview for all residents in the facility. Findings included: - During initial tour on 09/06/22 at 10:15 AM surveyor toured the kitchen and did not find temperature logs for food preparation. On 09/06/22 at 10:20 AM Administrative Staff B reported for meal service the CMA was supposed to meet the kitchen staff with the "Hot Cart" and then serve the residents their meals. On 09/06/22 at 10:37 AM "Certified Medication Aide" C reported the kitchen staff from the other building brought over the cart and put the pans in the warmers and then served the food to the residents. She stated they took temperatures of the food to made sure it was hot enough, but the kitchen did not bring over menus, so they had not been getting the temperature of the foods. She looked through the kitchen paperwork and was able to provide menus with food temperatures for the following days: No record of food temperatures prior to 09/01/22. 09/01/22 failed to include temperature for supper foods 09/02/22 failed to have lunch or supper food temperatures. No record of food temperatures after 09/03/22. During service of the noon meal on 09/06/22 at 11:44 AM observations revealed the food was brought over on a regular cart and not a heated	S3298		

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S3298	Continued From page 3	S3298		

cart. "Certified Medication Aide" C had put one of the steam containers for lunch in the warmer which and put the other one in. She then proceeded to get plates and serving utensils out to plate the food. CMA C commented that she had asked the kitchen to send over the menus to take the temperatures on, but they did not send any. When she had all the utensils ready, she removed the foil partially off the chicken and the rice and started to plate the food. She took the temperature of the chicken and it read 100 degrees Fahrenheit (F), the rice was 120 F and peas were 140 F. CMA C acknowledged she did not know what the serving temperature of the food should be. She said if she felt it was not quite hot enough to serve the residents, she would heat it in the microwave for a little bit, so the residents did not have to wait for their food. CMA C also acknowledged she did not know that foods reheated in the microwave needed to be heated to 165 F. CMA C checked the first plate after putting it in the microwave twice to ensure it was at 165 F. At 12:03 PM she checked the temperature of the chicken to see if it was hot enough and it read 124.7 F and the rice was only 117.6 F. CMA C then proceeded to fix each plate and then put it in the microwave to heat it up to 165 F.

Observations on 09/07/22 at 11:12 AM the food for lunch was in the steamer and it was set on 10. The steamer had 2 pan in it and there were 3 steam pans sitting on the cabinet at room temperature. One pan was labeled chicken strips. Observation revealed the food was delivered on a regular cart and not a "hot cart".

At 11:30 AM on 09/07/22 CMA C stated the pans in the steamer were hamburger steak and mashed potatoes. The other pans contained

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gravy, green beans, and chicken strips. She stated that the gravy and vegetables usually remained hot enough sitting out on the counter as there wasn't enough room in the steamer for additional pans.

On 09/07/22 at 11:45 AM CMA C put on a pair of gloves and then got a thermometer and temped the food. As soon as the temperature reached 140 F took out the thermometer, the meat read 148 F, and the potatoes were 140 F. She also temped the gravy which read 111 F and the beans were 135 F. CMA C began to prepare the plates and asked what she was going to do with the gravy and said she was just going to go ahead and put it on top of the potatoes since they were hot enough. She acknowledged the gravy temperature read 111 F and then got a glass bowl and poured some gravy in it and put it in the microwave for one minute. She took it out and it only reached 141 F, so she put it back in again and it read 161 F, she put it in the microwave again, and checked the temperature and said it was OK. CMA C, then proceeded to prepare the rest of the plates.

On 09/06/22 at 04:19 PM CMA D reported the CMAs were to be serve the residents their meals now. She acknowledged did not take the temperature of the food before serving it as she usually gave residents their medications or helping them get to supper when the food comes. When we first started this process, they told us all we had to do was serve the food and then someone brought over papers and said we were supposed to be taking temperature of the food as well. We didn't have any thermometers, so someone brought over some thermometers later. She stated when the food was ready, she had to leave the Assisted Living (AL) area and go to the

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S3298	Continued From page 5 Skilled side and get the food and bring it back and put it in the steamer. She said if the kitchen didn't send the right food, we had to go back over to the other side and get it. On 09/07/22 at 10:11 AM "Dietary Staff" E confirmed the staff in AL were supposed to take food temperatures prior to serving the food and all the paperwork for them to fill out is in the AL kitchen. Dietary staff E acknowledged that that she had not provided training for the staff in AL related to food service. The Skilled kitchen was only responsible for getting the food over to the AL. Review of the "Serving Temperatures for Hot and Cold Foods" revised on 04/06/20 revealed hot foods must be held at or greater than 135 degrees F. All hot foods will be kept in steam table pans and placed in steam table carts or in the oven. It also identified the cook will take temperatures of hot and cold food items using approved food thermometers prior to each meal service and food temperatures will be recorded. The policy for "Monitoring Food Temperatures for Food Service" revised on 04/06/20 revealed if the serving temperature of a hot food item is not at 135 F or higher when checked prior to meal service, the item will be reheated to at least 165 F for a minimum of 15 seconds. The item may be reheated only once and must be discarded or consumed within two hours. The administrator failed to ensure staff prepared and served food using safe methods and ensure staff served it at the proper temperature.	S3298		

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S3305	Continued From page 6	S3305		
S3305 SS=D	26-41-207 (a) (b) Infection Control (a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the provision of a safe, sanitary, and comfortable environment for residents. (b) Each administrator or operator shall ensure the development of policies and implementation of procedures to prevent the spread of infections. These policies and procedures shall include the following requirements: (1) Using universal precautions to prevent the spread of blood-borne pathogens; (2) techniques to ensure that hand hygiene meets professional health care standards; (3) techniques to ensure that the laundering and handling of soiled and clean linens meet professional health care standards; (4) providing sanitary conditions for food service; (5) prohibiting any employee with a communicable disease or any infected skin lesions from coming in direct contact with any resident, any resident ' s food, or resident care equipment until the condition is no longer infectious; (6) providing orientation to new employees and employee in-service education at least annually on the control of infections in a health care setting; and (7) transferring a resident with an infectious disease to an appropriate health care facility if the administrator or operator is unable to provide the isolation precautions necessary to protect the health of other residents. This REQUIREMENT is not met as evidenced by:	S3305		

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S3305	Continued From page 7 KAR 26-41-207 (b)(4) The facility reported a census of seven residents. Based on observations and interview the administrator failed to ensure staff implemented procedures to prevent the spread of infections by the failure to ensure staff did not touch ready to eat food with potentially contaminated gloves. This had the potential to 1 resident who had sliced tomatoes for lunch. Findings included: - On 09/07/22 at 11:45 AM "Certified Medication Aide" C put on a pair of gloves and then prepared to serve lunch. She opened the drawers to get out utensils, went through the resident menus, and then began to serve the plates. At 11:48 AM CMA C got a bowl out of a cabinet and in doing so touched the inside area of the bowl. She proceeded to pour gravy in the bowel to reheat in the microwave. She proceeded to prepare plates getting different items out of drawers, in and out of the microwave and touching other potentially contaminated surface areas. With the same gloved hands, she proceeded to fix a plant and too out sliced tomatoes with the same gloved hands that she had been in and out of the cabinet drawer, microwave, and refrigerator. On 09/07/22 at 12:23 PM Administrative Staff A reported staff were not to touch ready to eat foods without changing their gloves that had potentially been contaminated. According to the "Focus on Food Safety" guidance from the Kansas Department of Agriculture dated August 2017, revealed when handling ready-to-eat foods, service workers may use spatulas, tongs, forks, dispensing equipment,	S3305		

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S3305	Continued From page 8 or single-use gloves. Guidelines included to put gloves on only when ready to handle ready-to-eat foods, then discard the gloves. The administrator failed to ensure dietary staff served foods using techniques to ensure the prevention of the spread of infections by the failure of staff to use proper glove usage when handling ready to eat foods.	S3305		
S3310 SS=D	26-41-207 (b) (5-6) (c) Infection Control Policies (b) (5) prohibiting any employee with a communicable disease or any infected skin lesions from coming in direct contact with any resident, any resident ' s food, or resident care equipment until the condition is no longer infectious; (6) providing orientation to new employees and employee in-service education at least annually on the control of infections in a health care setting; and (c) Each administrator or operator shall ensure the facility ' s compliance with the department ' s tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105 This REQUIREMENT is not met as evidenced by: K.A.R 26-41-207(c) The facility reported a census of seven residents. Based on interview and record review for 1 of 2 newly hired employees, the administrator failed to ensure the facility remained in compliance with the department's tuberculosis (TB) guidelines for	S3310		

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S3310	Continued From page 9 adult care homes adopted by reference in K.A.R. 26-39-105. Findings included: - Review of two newly hired employee files on 09/06/22 revealed the following: Certified Medication Aide (CMA) C hired on 02/22/22 for the Long-Term Care side of the facility but worked in the Assisted Living side failed to have a 2-step TB skin test completed. 09/06/22 at 1:33 PM, Administrative Staff A brought in the employee information and confirmed that CMA C had not received a 2-step TB skin test. For 1 of 2 newly hired employees the operator failed to ensure the facility remained in compliance with the department's tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105.	S3310		