STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N089035	A. BUILDING: _____ B. WING _____	05/01/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE HOMESTEAD OF TOPEKA	5820 SW DRURY LANE TOPEKA, KS 66604

(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 represents the findings of a resurvey with attached complaint #166171 at the above named assisted living facility conducted on 04/27/23 and 05/01/23.	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 37 residents. Based on interview and record review the administrator failed to provide quarterly reviews of the facility's emergency management plan with staff and residents.	S3280		

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

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S3280	Continued From page 1 Findings included: - Review of the facility's emergency plan notebook revealed the most recent quarterly review of the emergency management plan with staff and residents was documented on 07/07/21. On 04/27/23 at 02:37 PM Administrative Staff A confirmed the facility's record lacked documentation of quarterly reviews of the emergency management plan with staff and residents. The administrator failed to provide quarterly reviews of the facility's emergency management plan with staff and residents.	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.	S3298		

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S3298	Continued From page 2 This REQUIREMENT is not met as evidenced by: KAR 26-41-206(d) The facility reported a census of 37 residents. The facility had a main kitchen where food was stored, prepared, and served. Based on interview and record review, the administrator failed to ensure food was served at the proper temperature. Findings included: - Observation on 04/27/23 at approximately 12:37 PM of the kitchen revealed there was no food temperature log. On 04/27/23 at approximately 12: 37 PM Dietary Staff C confirmed there was no food temperature log and could not locate the thermometer used for obtaining food temperatures. The Kansas Department of Agriculture's "Focus on Food Safety" booklet documented "minimum hot holding temperature is 135 degrees Fahrenheit (F)," and "maximum cold holding temperature is 41 degrees F. The administrator failed to ensure food was served at the proper temperature.	S3298		
S3299 SS=F	26-41-206 (e) (1) Facility Food Storage (e) Food storage. Facility staff shall store all food under safe and sanitary conditions.	S3299		

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S3299	Continued From page 3 (1) Containers of poisonous compounds and cleaning supplies shall not be stored in the areas used for food storage, preparation, or serving. This REQUIREMENT is not met as evidenced by: KAR 26-41-206(e) The facility reported a census of 37 residents. The facility had a main kitchen where food was stored, prepared, and served. Based on observation and interview the administrator failed to ensure food was stored under safe conditions. Findings included: - Observation on 04/27/23 at approximately 12:37 PM revealed a large refrigerator and large freezer that contained food items. A freezer temperature logs was not present to ensure food items were stored at the proper temperature. A refrigerator temperature log was present and filled out for the month of April until 04/08/23. From 04/08/23 to 04/27/23 at start of the survey, no temperatures were logged. Which was 19 days no temperatures were logged for the refrigerator. On 04/27/23 at approximately 12:37 PM Dietary Staff C confirmed there was freezer temperature log and the refrigerator temperature log was only filled out to 04/08/23. The administrator failed to ensure food was stored under safe conditions.	S3299		

Kansas Department on Aging

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