

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N046059	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 08/12/2026
NAME OF PROVIDER OR SUPPLIER CEDAR LAKE VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 15325 S LONE ELM RD OLATHE, KS 66061		
(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 resurvey with a complaints at the above named Assisted Living conducted on 08/10/26, 08/11/26 and 08/12/26..	S 000		
S3215 SS=F	26-41-205 (h) Medication Storage (h) Storage. Licensed nurses and medication aides shall ensure that all medications and biologicals are securely and properly stored in accordance with each manufacturer ' s recommendations or those of the pharmacy provider and with federal and state laws and regulations. (1) Licensed nurses or medication aides shall store non-controlled medications and biologicals managed by the facility in a locked medication room, cabinet, or medication cart. Licensed nurses and medication aides shall store controlled medications managed by the facility in separately locked compartments within a locked medication room, cabinet, or medication cart. Only licensed nurses and medication aides shall have access to the stored medications and biologicals. (2) Each resident managing and self-administering medication shall store medications in a place that is accessible only to the resident, licensed nurses, and medication aides. (3) Any resident who self-administers medication and is unable to provide proper storage as recommended by the manufacturer or pharmacy provider may request that the medication be stored by the facility. (4) A licensed nurse or medication aide shall not administer medication beyond the manufacturer ' s or pharmacy provider ' s recommended date of expiration.	S3215		

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

TITLE

(X6) DATE

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S3215	Continued From page 1 This REQUIREMENT is not met as evidenced by: KAR 26-41-205(h) The facility reported a census of 57 residents. Based on observation and interview, the facility failed to ensure all medications and biologicals were properly stored in accordance with each manufacturer's recommendations. Findings included: - On 10/03/23 at 04:20 PM an observation of the medication room refrigerator on the Briar memory care unit revealed one vial of Tubersol was opened but was not dated to show when the vial was opened. The 10/30/2025 "Medications Acquisition, Receiving, Packaging, and Storage, AL- Enterprise" policy documented, "All medications will be stored in accordance with manufacturer's recommendations ..." The vial of Tubersol, the original packaging it came in and the product insert all documented the vial should be discarded after 30 days if it had been entered and in use. The facility failed to ensure medications and biologicals were stored in accordance with manufacturer's recommendations.	S3215			
S3298 SS=F	26-41-206 (d) Food Preparation (d) Food preparation. Food shall be prepared	S3298			

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S3298	Continued From page 2 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: KAR 26-41-206 (d) The facility had a census of 57 residents. All 57 residents ate food prepared in the same kitchen. The facility failed to ensure food items were served at the proper temperature. Findings included: - On 08/11/26 at 09:45 AM review of the food temperature log sheets for the Azalea/Briar neighborhoods for the month of July 2026 revealed the lack of food temperature documented for the following shifts: 07/04/26- Dinner 07/05/26- Lunch, Dinner 07/06/26- Breakfast, Lunch, Dinner	S3298		

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S3298	Continued From page 3 07/07/26- Dinner 07/13/26- Dinner 07/16/26- Dinner 07/17/26- Dinner 07/22/26- Breakfast, Lunch, Dinner 07/23/26- Dinner 07/24/26- Dinner 07/25/26- Dinner The 2005 "Dietary Guidelines for Americans" documented in order to keep food out of the bacterial growth danger zone, cold food should be stored below 40 degrees Fahrenheit (F). Frozen food items should be kept at zero degrees Fahrenheit or below and these temperatures should be checked with an appliance thermometer. To keep food out of this danger zone, keep cold food cold (below 40°F) and hot food hot (above 140°F). The 03/23/2026 "Food Temperature Monitoring- Food and Nutrition Services" policy documented, "Food temperatures are taken and recorded before each meal service." The facility failed to ensure food items were served at the proper temperature.	S3298			
S3320 SS=E	28-39-254 CONSTRUCTION (a) The assisted living facility or residential health care facility shall be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public. (b) All new construction, renovation, remodeling and changes in building use in existing buildings shall comply with building and fire codes, ordinances and regulations enforced	S3320			

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S3320	Continued From page 4 by city, county, and state jurisdictions, including the state fire marshal. (c) New construction, modifications and equipment shall conform to the following codes and standards: (1) Title III of the Americans with disabilities act, 42 U.S.C. 12181, effective as of January 26, 1992; and (2) "Food Service Sanitation Manual," health, education, and welfare (HEW) publication no. FDA 78-2081, as in effect on July 1, 1981. This REQUIREMENT is not met as evidenced by: KAR 28-39-254 (a) The facility reported a census of 57 residents. Based on observation, record review and interview, the facility failed to ensure staff secured all chemicals to maintain the safety of all residents, staff and visitors. Findings included: - An observation during initial tour on 08/10/26 at 04:07 PM of the Briar memory care unit satellite kitchen revealed the following unlocked chemicals with "KEEP OUT OF REACH OF CHILDREN" warning labels: Two .95-quart containers of Biofresh deodorizer One 23 fluid (fl.) ounce (oz.) spray bottle of Windex window cleaner One 32 fl. oz. bottle of BETCO Stix toilet bowl cleaner One spray bottle of ECOLAB peroxide	S3320			

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S3320	Continued From page 5 multi-surface cleaner One spray bottle Heavy Duty Alkaline Bathroom Cleaner At approximately 04:10 PM on 08/10/26 Administrative Staff A confirmed the lockable under-the-counter cabinet used for storing chemicals appeared to be locked but when the cabinet door handle was pulled the door opened. The 10/30/2025 "Memory Care Overview- Assisted Living" policy documented, "To ensure the safety of residents with cognitive deficits and minimize risks to residents, staff, and visitors, the memory care unit staff will ensure safe and compliant storage, handling, and disposal of chemicals in the memory care unit." The facility failed to ensure staff kept chemicals locked out of reach for residents, staff and visitor safety.	S3320		