Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N001007	A. BUILDING: _____ B. WING _____	11/19/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARROWOOD LANE RESIDENTIAL CARE	615 E FRANKLIN HUMBOLDT, KS 66748

(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 citation represents the findings of an Abbreviated Survey with complaint investigation 191846 for the above named Assisted Living Facility conducted on 11/19/24, which was substantiated.	S 000		
S3305 SS=E	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	S3305		

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

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S3305	Continued From page 1 health of other residents. This REQUIREMENT is not met as evidenced by: KAR 26-41-207 (a) The facility reported a census of 16 residents. Based on observations and interview, the Operator failed to ensure facility staff cleaned resident's rooms, including the bathroom, closets, and other areas sufficiently to provide a safe and sanitary environment for residents. Findings included: - Observations of resident rooms conducted with Administrative Nurse B who also confirmed the following observations: R3 had mouse droppings on the top of his box springs at the head of the bed. R4 had live bed bugs on her bed frame and bottom mattress. R5 had mouse droppings on his mattress. R6 had mouse droppings in her plastic containers with food, in her dresser drawers, under her desk, in her closet and in her bathroom. Interview on 11/19/24 at 10:10 AM R7 reported she did not think she had problems with bed bugs but did have concerns with mice in her room. She stated a company came and used steel wool under the sink. R7 said that didn't work so she had her family come and add a sweep to the bottom of her door and the smoking-room door, and fix the area under the sink so the mice couldn't get in. R7 stated she has not had any issues since her family came fixed it.	S3305		

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S3305	Continued From page 2 Interview on 11/14/24 at 10:18 AM Operator A, reported she had a local company now providing pest control and they have deep heated two rooms for bed bugs and then completed chemical treatment of all rooms. Operator A also purchased electronic devices to plug in wall sockets that were supposed to help keep mice away and have them in R7's room as she is the only one who has complained of mice in her room. Interview on 11/19/24 at 12:04 PM R8 reported the facility had issues with mice and rats. R8 said he once felt something crawling on his leg during the night and it was a baby rat and he just knocked it off and hasn't seen any more. Interview on 11/19/24 at 12:18 PM R3 reported he has had a few mice but staff had caught them. Interview on 11/19/24 at 04:07 PM Certified Nurse Aide C reported staff cleaned resident rooms on their shower days. They have a check list they use and it included wiping everything thing down, changing linens, clean window seals, vacuum floor and cleaning the bathroom for the main cleaning. The operator failed to ensure facility staff-maintained resident rooms in a manner to ensure all residents had a safe, sanitary and comfortable environment to live in.	S3305		