STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N089040	A. BUILDING: _____ B. WING _____	04/10/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE TOPEKA	5800 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 citations represent the findings of the licensure resurvey with attached complaint numbers 186630, 186463, 184044, 183592, 183340, 182857, and 182735, for the above named facility conducted on 04/08/24, 04/09/24 and 04/10/24.	S 000		
S3248 SS=E	26-41-102 (d) Staff Qualifications Employee Records (d) The employee records and agency staff records shall contain the following documentation: (1) Evidence of licensure, registration, certification, or a certificate of successful completion of a training course for each employee performing a function that requires specialized education or training; (2) supporting documentation for criminal background checks of facility staff and contract staff, excluding any staff licensed or registered by a state agency, pursuant to K.S.A. 39-970 and amendments thereto; (3) supporting documentation from the Kansas nurse aide registry that the individual does not have a finding of having abused, neglected, or exploited a resident in an adult care home; and (4) supporting documentation that the individual does not have a finding of having abused, neglected, or exploited any resident in an adult care home, from the nurse aide registry in each state in which the individual has been known to have worked as a certified nurse aide.	S3248		

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

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S3248	Continued From page 1 This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-102 (d) (2) (3) The facility reported a census of 27 residents. The sample included 3 residents, 2 focused reviews, and 5 newly hired employees. Based on record review and interview the Operator failed to ensure the employee records contained supporting documentation for criminal background checks being performed for "Certified Medication Aide" (CMA) C, and the criminal background check being performed in a timely manner for CMA D pursuant to K.S.A. 39-970. The operator further failed to ensure the employee records for CMA C and "Certified Nurse Aide" (CNA) E had supporting documentation from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home. Findings included: - Record review on 04/09/24 for CMA C revealed she began employment on 06/16/23. The employee record lacked documentation of a background check pursuant to K.S.A. 39-970, and further lacked a check from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home. Record review for CMA D revealed she began employment on 07/12/23. The record contained a document dated 08/07/23 from the department titled "Notice of Employment Prohibition"	S3248		

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S3248	Continued From page 2 Department review of the criminal background checks recorded the submission for the background check was created on 07/28/23 at 02:55 AM and was modified on 07/28/23 at 03:14 AM. This was sixteen days after CMA D began employment. Interview on 04/10/24 at approximately 12:40 PM with Regional Administrator F confirmed CMA D did not clock in for training with residents until 07/23/23. Record review for CNA E revealed she began employment on 06/28/23. The employee record lacked documentation from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home. Interview on 04/10/24 at approximately 12:45 PM with Regional Nurses A and B, and regional Administrator F confirmed the employee record for CMA C lacked documentation of a background check pursuant to K.S.A. 39-970, and further lacked a check from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home. They continued to confirm CMA D's employee record lacked documentation of the background check being performed in a timely manner, and they further confirmed CNA's C and E employee files lacked documentation from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home.	S3248		

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S3248	Continued From page 3 The Operator failed to ensure the employee records contained supporting documentation for criminal background checks being performed for CMA C, and the criminal background check being performed in a timely manner for CMA D pursuant to K.S.A. 39-970. The operator further failed to ensure the employee records for CMA C and CNA E had supporting documentation from the Kansas Nurse Aide Registry that the individual's did not have a finding of having abused, neglected, or exploited a resident in an adult care home.	S3248		
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:	S3280		

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S3280	Continued From page 4 K.A.R. 26-41-104 (d) (3) The facility reported a census of 27 residents. Based on interview and record review the Operator failed to ensure the disaster and emergency preparedness training was provided to all residents at least quarterly. Findings included: - Record review on 04/09/24 of the facility provided emergency preparedness training revealed an untitled document that had a list of all residents with the topic listed as "Elopement Drill". The records lacked documentation for the second, third, and fourth quarter training with all residents. Interview on 04/10/24 with Regional Nurses A and B confirmed the records lacked documentation for the second, third, and fourth quarters emergency preparedness training with all residents.	S3280		