STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	375568	A. Building B. Wing	03/20/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Maplewood Care Center	6202 East 61st Street Tulsa, OK 74136

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. 41318 Based on observation and interview, the facility failed to ensure a shower stall and curtain was clean for one of one shower rooms observed. The Administrator identified 109 residents resided in the facility. Findings: On 03/17/24 at 10:15 a.m., the southeast shower room was observed. The middle shower stall was the only one with a shower curtain. The shower walls had hard water stains, and an area of black substance in the grout on the floor next to the wall. The substance was able to be scratched off. The shower curtain was observed to have brown and orange stains scattered from the top to the bottom of the curtain. On 03/20/24 at 9:48 a.m., Housekeeper #1 stated shower rooms were cleaned everyday. The shower room was observed. The same hard water stains and black substance in the grout was observed. The shower curtain had the same stains. On 03/20/24 at 9:58 a.m., Housekeeping supervisor stated shower rooms should be cleaned every day. She stated they monitored the shower rooms two to three times a day. She stated she didn't know the process for ensuring shower curtains were cleaned. She was made aware of the observations on 03/17/24 and 03/20/24 and was asked if the room had been adequately cleaned. She stated, No.

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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

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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. 34270 Based on record review and interview, the facility failed to ensure medications were administered as ordered for one resident (#58) of six sampled resident reviewed for medications. The Administrator stated 109 residents resided in the facility. Findings: A Medication Ordering and Receiving from Pharmacy, policy read in part, .Reorder medications four days in advance of need .to ensure adequate supply is on hand . Resident #58 had diagnoses which included epilepsy, unspecified, not intractable, without status epilepticus. A care plan problem for seizures, dated 03/01/24, documented Resident #58's was to be administered medications as ordered. A controlled drug disposition report, dated 02/09/24, documented 60 doses of phenobarbital 64.8 mg had been delivered to the facility for the use of Resident #58. The report documented the last dose of the original 60 doses was signed out on 03/18/24 at 6:00 p.m. A medication administration record, dated 03/01/204 through 03/20/24, documented a dose of phenobarbital 64.8 mg was scheduled to be administered to Resident #58 on 03/19/24 between 5:30 a.m. and 6:30 a.m. The record documented the medication was not available to be administered to the resident. A medication administration record, dated 03/01/204 through 03/20/24, documented Resident #58 did not receive the AM or PM doses of phenytoin sodium 200 mg on 03/18/24. It documented the medication was not available. A controlled drug disposition report, dated 03/19/24, documented six doses of phenobarbital 64.8 mg had been delivered to the facility for the use of Resident #58. The report documented the first dose of the original six was signed out on 03/19/24 at 7:59 p.m. A progress note, dated 03/19/24 at 10:36 p.m., documented Resident #58 stated they had two seizures. It documented the resident was sent to the hospital per the resident's request. A progress note, dated 03/20/24 at 2:28 a.m., documented Resident #58 returned to the facility with a diagnosis of seizure like activity and a new order for phenytoin sodium 200 mg twice a day. It documented this was the current dose for the medication. On 03/20/24 at 1:34 p.m., CMA #1 stated Resident #58 had run out of phenobarbital 64.8 mg on 03/18/24 and it was ordered. They stated six doses of the medication arrived on 03/19/24. (continued on next page)

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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	On 03/20/24 at 2:03 p.m., the ADON was shown Resident #58's March medication administration record and was asked if the medications had been administered as ordered. They stated, No.

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F 0802 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide sufficient support personnel to safely and effectively carry out the functions of the food and nutrition service. 41318 Based on observation, record review, and interview, the facility failed to ensure sufficient dietary staff to provide alternative meals. The Administrator identified 109 residents resided in the facility. She identified two residents received nutrition and hydration solely through a feeding tube. Findings: An Alternative Menu, undated, documented the following alternatives were available for lunch and supper: loaded baked potatoes, chef salad, bologna and cheese sandwich, turkey and cheese sandwich hot or cold, ham and cheese sandwich hot or cold, grilled cheese sandwich, cheese burger with fries or chips and side salad, peanut butter and jelly sandwich, and three different soups. A Dietary Schedule, dated February 26th through 29th, 2024, documented four to six employees were scheduled. A Dietary Schedule, dated March 1st through 17th, 2024, documented three to six employees were scheduled. On 03/17/24 at 10:37 a.m., Resident #47 stated they would turn in their alternative meal request for supper shortly after lunch. Resident #47 stated there had been times the dietary staff told the residents they couldn't cook any alternatives because there wasn't enough staff. Resident #47 stated at other times, dietary staff stated the only alternative was a peanut butter and jelly sandwich. Resident #58 agreed with Resident #47's statements. On 03/17/24 2:35 p.m., Resident #73 stated when there wasn't enough dietary staff the only alternative meal was peanut butter sandwiches. On 03/18/24 at 1:41 p.m., the CDM was talking with Resident #47. Resident #47 asked the CDM why alternative meals were not provided as ordered. CDM stated the alternative meals were limited when there weren't enough staff . On 03/18/24 at 1:54 p.m., the CDM stated their corporation stated while dietary was short staffed to just offer peanut butter and jelly sandwiches as an alternative. The CDM stated they only offer peanut butter and jelly sandwiches. The CDM stated the last time the kitchen was short staffed was last Friday or Saturday. On 03/18/24 at 3:25 p.m., the Administrator stated they have only offered peanut butter and jelly sandwiches recently because there had been a few dietary staff out for personal reasons. On 03/18/24 at 3:42 p.m., the CDM stated seven people a day were needed to be adequately staffed.

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F 0803 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident. 41318 Based on observation, record review, and interview, the facility failed to ensure alternative meals were provided for three (#47, 48, and #73) of three sampled residents reviewed for meal service. The Administrator identified 109 residents resided in the facility. She identified two residents received nutrition and hydration solely through a feeding tube. Findings: An Alternative Menu, undated, documented the following alternatives were available for lunch and supper: loaded baked potatoes, chef salad, bologna and cheese sandwich, turkey and cheese sandwich hot or cold, ham and cheese sandwich hot or cold, grilled cheese sandwich, cheese burger with fries or chips and side salad, peanut butter and jelly sandwich, and three different soups. On 03/17/24 at 10:37 a.m., Resident #47 stated they would turn in their alternative meal request for supper shortly after lunch. Resident #47 stated there had been times the dietary staff told the residents they couldn't cook any alternatives. Resident #47 stated at other times, dietary staff stated the only alternative was a peanut butter and jelly sandwich. Resident #58 agreed with Resident #47's statements. On 03/17/24 2:35 p.m., Resident #73 stated recently the only alternative meal was peanut butter sandwiches. On 03/18/24 at 1:41 p.m., the CDM was talking with Resident #47. Resident #47 asked the CDM why alternative meals were not provided as ordered. CDM stated when there weren't enough staff the alternative meals were limited. On 03/18/24 at 1:54 p.m., the CDM stated they only offer peanut butter and jelly sandwiches at times. On 03/18/24 at 3:25 p.m., the Administrator stated they didn't have a policy regarding meal alternatives. She stated they have an alternative menu the residents can order from. She stated they have only offered peanut butter and jelly sandwiches recently.