

Office of Inspector General

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 100346	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 09/10/2025
NAME OF PROVIDER OR SUPPLIER SPARKS NURSING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 500 EAST WHITMER STREET CENTRAL CITY, KY 42330		
(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	
P 000	INITIAL COMMENTS Based upon implementation of the acceptable Plan of Correction (PoC), the facility was deemed to be in compliance on 09/09/2025.	P 000			

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

TITLE

(X6) DATE

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P 000	Initial Comments A Relicensure and Complaint Survey investigating KY00046513, KY00046584, KY00046940, KY00045852, KY00047080, KY00046079, KY00046467, and KY00046583 was concluded on 08/27/2025. There were no deficiencies issued related to KY00046584, KY00046513, KY00046940, KY00045852, KY00047080, KY00046079, KY00046467, and KY00046583. Survey date: 08/25/2025-08/27/2025 Survey Census: 75 Sample Size: 12 Supplemental Residents: 0	P 000	 SEP - 9 2025 CHFS Office of Inspector General Division of Health Care - WB Received by _____	
P 355	902 KAR 20:036 5(3)(c)4 Section 5. Provision of Services Section 5. Provision of Services. (3) A PCH or SPCH shall meet the following requirements relating to the provisions of residential care services: (c) Dietary services. 4. Food preparation and storage. a. There shall be at least a three (3) day supply of food to prepare well-balanced, palatable meals. b. Food shall be prepared with consideration for any individual dietary requirement. c. Modified diets, nutrient concentrates, and supplements shall be given only on the written order of a physician. d. At least three (3) meals per day shall be served with not more than a fifteen (15) hour span between the evening meal and breakfast. e. Between-meal snacks, including an evening snack before bedtime, shall be offered to all residents.	P 355		

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If continuation sheet 2 of 4

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P 355	Continued From page 2 service safety. Food items were not dated at the time of storage and food that had been opened were not covered and/or sealed to prevent contamination. The deficiency had the potential to affect 75 of the facility's 75 residents who consumed food from the kitchen. The findings include: Review of the facility titled, "Dietary Policy", undated, revealed all opened containers of leftover food items should be covered, labeled, dated, and initialed when refrigerated. Additionally, any open bags of food in the pantry on the shelves should be placed in a plastic bag, sealed, labeled, and initialed. It could be left in the original bag, but it must be sealed, labeled, dated, and initialed at the time it was placed in the freezer. Observation of the facility's kitchen area on 08/25/2025 at 2:00 PM, revealed in the reach in cooler one three pound, partially empty covered container of sour cream that was not labeled or dated, one three pound, partially empty covered container of cottage cheese that was not labeled or dated, and one extra-large stainless-steel mixing bowl with Jello not covered, labeled or dated. Continued observation of the kitchen area in the walk-in pantry, revealed one opened five-pound bag of yellow cake mix that was not labeled or dated, one four pound opened box of baking soda that was not labeled or dated, one opened three pound box of instant potatoes that was not labeled or dated, and one opened five pound bag of oatmeal that was not labeled or dated. In interview with the Dietary Manager (DM) on 08/27/2025 at 1:30 PM, she stated all items were	P 355		

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P 355	Continued From page 3 to be labeled and dated prior to being stored in the refrigerator and the pantry. She stated the kitchen staff were responsible for checking refrigerator and pantry each day. The DM stated she expected kitchen staff to follow policies and procedures. She further stated residents could get sick if food was not stored properly. In interview with the Administrator on 08/27/2025 at 1:30 PM, she stated she expected the kitchen staff to follow policies related to storing food. She stated all food should be labeled and dated before storing. She further stated outcome for the residents could get "sick" if served food was not stored properly.	P 355			