### Post-Certification Revisit Report

Public reporting for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to CMS, Office of Financial Management, P.O. Box 20084, Baltimore, MD 21207; and to the Office of Management and Budget. Paperwork Action Project (0938-0390), Washington, D.C. 20503.

#### Name of Facility
PARKWAY HEALTH AND REHABILITATION CENTER

#### Street Address, City, State, Zip Code
200 SOUTH PARKWAY WEST
MEMPHIS, TN 38109

This report is completed by a qualified State surveyor for the Medicare, Medicaid, and/or CLIA program to show deficiencies previously reported on the CMS-2567, Statement of Deficiencies and Plan of Correction, that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the CMS-2567 (prefix codes shown to the left of each requirement on the survey form).

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Reviewed By: [Signature]
Reviewed By: [Signature]
Date: 12/13/11
Date: [Signature]

Followup to Survey Completed on: 11/5/2012

Check for any Uncorrected Deficiencies. Was a Summary of Uncorrected Deficiencies (CMS-2567) Sent to the Facility? YES  NO
Means of egress are continuously maintained free of all obstructions or impediements to full instant use in the case of fire or other emergency. No furnishings, decorations, or other objects obstruct exits, access to, egress from, or visibility of exits. 7.1.10

This STANDARD is not met as evidenced by: Based on observation, it was determined the facility failed to maintain the path of egress from the west wing corridor during this follow-up survey.

The findings included:

Observations during the follow up survey of the west wing corridor on 12/10/12 at 12:45 PM, revealed the empty rolling chart rack was still stored in the path of egress outside the minimum data set office along with two other chart racks that were filled with charts.


1. The rolling chart rack was removed from the hall along with the two empty charts and placed in the minimum data set office.
2. All staff has been re-in serviced regarding no furnishings, decorations, or other objects to obstruct the path for egress.
3. The Maintenance department will conduct daily audits for 3 months to insure no objects obstruct the path of egress and report findings to monthly CQI.
4. The Administrator will monitor through CQI process and revise Plan of Correction as indicated.

AOC: 12/13/12

Laonda Y. Jeff, Acting Administrator 12/13/12