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	N012001	A. BUILDING: _____ B. WING _____	06/25/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHEYENNE COUNTY VILLAGE INC	820 S DENISON STREET ST FRANCIS, KS 67756

(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 for the above named facility conducted on 06/25/24.	S 000		
S3081 SS=E	26-41-201 (c) Functional Capacity Screen Reassessment (c) Designated facility staff shall conduct a screening to determine each resident ' s functional capacity according to the following requirements: (1) At least once every 365 days; (2) following any significant change in condition as defined in K.A.R. 26-39-100; and (3) at least quarterly if the resident receives assistance with eating from a paid nutrition assistant. This REQUIREMENT is not met as evidenced by: KAR 26-41-201 (c) (1) The census equaled 7 residents. The sample included 3 residents. Based on record review, observation and interview, Administrator A failed to ensure designated facility staff conducted a screening at least once every 365 days to determine each resident's functional capacity for 2 of 3 sampled Residents (R)1 and R2. Findings included: - R1's "Medical Record" revealed she admitted to the facility on 11/11/21 with a diagnosis of hypertension, hyperlipidemia, vitamin deficiency, edema and hypokalemia. The current "Resident Functional Capacity	S3081		

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

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S3081	Continued From page 1 Screen" (FCS) dated 01/11/23 recorded the resident as independent with toileting, transfer, walk/ mobility and eating, required physical assistance with bathing and dressing, and was unable to manage her medications and treatments. The FCS recorded R1 was usually continent, had short- and long-term memory impairment, impaired memory/ recall and impaired decision making, R1 was usually understandable and usually understood. The FCS further recorded R1 was at risk for falls/ unsteadiness, had impaired vision and hearing and used a walker for ambulation . R1's "Medical record" lacked completion of a FCS since 01/11/23. Interview on 06/25/24 at 02:20 PM with R1 stated facility staff helped her with bathing, dressing and administered medications, but she toileted herself. - R2's "Medical Record" revealed he admitted to the facility on 10/23/21 with diagnoses of anemia, carpal tunnel syndrome, depression, chronic obstructive pulmonary disease, gout, asthma and insomnia. The current "Resident Functional Capacity Screen" (FCS) dated 01/17/23 recorded the resident as independent with bathing, dressing, toileting, transfers, walk/mobility and eating. The FCS recorded R1 required physical assistance with management of medications and treatments. The FCS further recorded R2 was usually continent, had impaired vision and had socially inappropriate behavior. R2's "Medical record" lacked completion of a FCS since 01/17/23.	S3081		

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S3081	Continued From page 2 Interview on 06/25/24 at 02:07 PM with R2 stated facility staff helped him with bathing, dressing and administered medications, but he toileted himself. Interview on 06/25/24 at 02:02 PM Administrator A confirmed a FCS for R1 and R2 had not been completed annually. Administrator A failed to ensure designated facility staff conducted a screening at least once every 365 day to determine each resident's functional capacity for 2 of 3 sampled Residents (R)1 and R2.	S3081		
S3085 SS=E	26-41-202 (a) Negotiated Service Agreement (a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the development of a written negotiated service agreement for each resident, based on the resident ' s functional capacity screening, service needs, and preferences, in collaboration with the resident or the resident ' s legal representative, the case manager, and, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. The negotiated service agreement shall provide the following information: (1) A description of the services the resident will receive; (2) identification of the provider of each service; and (3) identification of each party responsible for payment if outside resources provide a service. This REQUIREMENT is not met as evidenced	S3085		

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S3085	Continued From page 3 by: KAR 26-41-202 (a) (3) The facility reported a census of 7 residents. The sample included 3 residents. Based on record review, observation and interview for 2 sampled residents (R)1 and R2, Administrator A failed to ensure the Negotiated Service Agreement (NSA) completed for residents who required health care services identified each party responsible for payment if outside resources provided a service. Findings included: - R1's "Medical Record" revealed she admitted to the facility on 11/11/21 with a diagnosis of hypertension, hyperlipidemia, vitamin deficiency, edema and hypokalemia. The current "Resident Functional Capacity Screen" (FCS) dated 01/11/23 recorded the resident as independent with toileting, transfer, walk/ mobility and eating, required physical assistance with bathing and dressing, and was unable to manage her medications and treatments. The FCS recorded R1 was usually continent, had short- and long-term memory impairment, impaired memory/ recall and impaired decision making, R1 was usually understandable and usually understood. The FCS further recorded R1 was at risk for falls/ unsteadiness, had impaired vision and hearing and used a walker for ambulation. The current "Negotiated Service Agreement" (NSA) dated 01/12/23 recorded R1 received oxygen services from an outside provider. The NSA lacked the party responsible for payment for oxygen services.	S3085		

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S3085	Continued From page 4 - R2's "Medical Record" revealed he admitted to the facility on 10/23/21 with diagnoses of anemia, carpal tunnel syndrome, depression, chronic obstructive pulmonary disease, gout, asthma and insomnia. The current "Resident Functional Capacity Screen" (FCS) dated 01/17/23 recorded the resident as independent with bathing, dressing, toileting, transfers, walk/mobility and eating. The FCS recorded R1 required physical assistance with management of medications and treatments. The FCS further recorded R2 was usually continent, had impaired vision and had socially inappropriate behavior. The current "Negotiated Service Agreement" (NSA) dated 01/17/23 recorded R2 received oxygen services from an outside provider. The NSA lacked the party responsible for payment for oxygen services. Observation on 06/25/24 at 02:07 PM of R2's room revealed an oxygen concentrator by his bed. R2 stated he wore his oxygen at night. Interview on 06/25/24 at 02:03 PM with Administrator A confirmed R1 and R2's current NSA lacked the party responsible for payment for oxygen services. Administrator A failed to ensure R1 and R2's NSA contained the party responsible for payment if outside resources provided a service.	S3085		
S3090 SS=D	26-41-202 (c) Admission Negotiated Service Agreement	S3090		

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S3090	Continued From page 5 (c) Each administrator or operator shall ensure the development of an initial negotiated service agreement at admission. This REQUIREMENT is not met as evidenced by: KAR 26-41-202 (c) The census totaled 7 residents. The sample included 3 residents. Based on interview and record review for 1 Resident (R)3, Administrator A failed to ensure the development of an initial negotiated service agreement upon admission. Findings included: - Review of the "Resident Roster" obtained on 06/25/24 included R3. The roster recorded R3's admission date as 03/29/24. Signed physician order dated 03/29/24 and signed on 04/01/24 recorded, :discharge to assisted living". R3's "Medical Record" revealed she admitted to the facility on 03/29/24 with diagnoses of depression, allergic rhinitis, vitamin deficiency and blindness in right eye. The "Resident Functional Capacity Screen" (FCS) dated 03/29/24 recorded the resident as independent with dressing, toileting, transfer, walk/mobility and eating, required physical assistance with bathing and management of medications and treatments. R3 had impaired memory/ recall, decision making and vision. R3	S3090		

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S3090	Continued From page 6 used a walker for ambulation. Record lacked completion of a negotiated service agreement. Interview on 06/25/24 at 03:00 PM with Administrator A confirmed unable to locate R3's admission negotiated service agreement. Facility failed to provide a policy on negotiated service agreements. Administrator A failed to ensure the development of an initial negotiated service agreement upon admission for R3.	S3090		
S3092 SS=E	26-41-202 (d) Negotiated Service Agreement Revisions (d) Each administrator or operator shall ensure the review and, if necessary, revision of each negotiated service agreement according to the following requirements:(1) At least once every 365 days; (2) following any significant change in condition, as defined in K.A.R. 26-39-100; (3) at least quarterly, if the resident receives assistance with eating from a paid nutrition assistant; and (4) if requested by the resident or the resident ' s legal representative, facility staff, the case manager, or, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. This REQUIREMENT is not met as evidenced by: KAR 26-41-202 (d) (1)	S3092		

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S3092	Continued From page 7 The census equaled 7 residents. The sample included 3 residents. Based on record review and interview for 2 residents (R)1 and R2, Administrator A failed to ensure the review, and if necessary, revision of the Negotiated Service Agreement (NSA) at least once every 365 days. Findings included: - R1's "Medical Record" revealed she admitted to the facility on 11/11/21 with a diagnosis of hypertension, hyperlipidemia, vitamin deficiency, edema and hypokalemia. The current "Resident Functional Capacity Screen" (FCS) dated 01/11/23 recorded the resident as independent with toileting, transfer, walk/ mobility and eating, required physical assistance with bathing and dressing, and was unable to manage her medications and treatments. The FCS recorded R1 was usually continent, had short- and long-term memory impairment, impaired memory/ recall and impaired decision making, R1 was usually understandable and usually understood. The FCS further recorded R1 was at risk for falls/ unsteadiness, had impaired vision and hearing and used a walker for ambulation. R1's "Medical record" lacked completion of a FCS since 01/11/23. The current "Negotiated Service Agreement" (NSA) dated 01/12/23 recorded facility staff assisted R1 twice a week with bathing, assisted with dressing and hair care and assisted with oxygen use. The NSA recorded facility staff managed R1's medications and monitored vital signs and weight checks and R1 required	S3092		

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S3092	Continued From page 8	S3092		

reminders from staff. R1 received oxygen services from an outside provider. The NSA lacked documentation for party responsible for payment for the oxygen services. The NSA lacked description for risk for falls/ unsteadiness and impaired vision and hearing.

Record lacked completion of an annual Negotiated Service Agreement since 01/12/23.

Interview on 06/25/24 at 02:20 PM with R1 stated facility staff helped her with bathing, dressing and administered medications, but she toileted herself.

- R2's "Medical Record" revealed he admitted to the facility on 10/23/21 with diagnoses of anemia, carpal tunnel syndrome, depression, chronic obstructive pulmonary disease, gout, asthma and insomnia.

The current "Resident Functional Capacity Screen" (FCS) dated 01/17/23 recorded the resident as independent with bathing, dressing, toileting, transfers, walk/mobility and eating. The FCS recorded R1 required physical assistance with management of medications and treatments. The FCS further recorded R2 was usually continent, had impaired vision and had socially inappropriate behavior.

R2's "Medical record" lacked completion of a FCS since 01/17/23.

The current "Negotiated Service Agreement" (NSA) dated 01/17/23 recorded facility staff monitored vital signs and weight. The NSA recorded R2 received oxygen services from an outside provider but lacked documentation of party responsible for payment of the outside

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S3092	Continued From page 9 provider. The NSA lacked documentation for party responsible for medication administration and further lacked interventions for impaired vision, hearing and socially inappropriate behavior. Record lacked completion of an annual Negotiated Service Agreement since 01/17/23. Interview on 06/25/24 at 02:07 PM with R2 stated facility staff helped with bathing, dressing, and administered medications, but he toileted himself. Interview on 06/25/24 at 02:02 PM with Administrator A confirmed a NSA for R1 and R2 had not been completed annually. Facility failed to provide a policy on negotiated service agreements. Administrator A failed to ensure the review, and if necessary, revision of the negotiated service agreement at least once every 365 days.	S3092		
S3165 SS=E	26-41-204 (d) Health Care Services (d) The negotiated service agreement shall contain a description of the health care services to be provided and the name of the licensed nurse responsible for the implementation and supervision of the plan. This REQUIREMENT is not met as evidenced by: KAR 26-41-204 (d) The facility reported a census of 7 residents. The	S3165		

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sample included 3 residents. Based on record review and interview for 2 sampled Residents (R)1 and R2, with the potential to affect all residents, Administrator A failed to ensure the negotiated service agreement contained the name of the licensed nurse responsible for the implementation and supervision of the health service plan.

Findings included:

- R1's "Medical Record" revealed she admitted to the facility on 11/11/21 with a diagnosis of hypertension, hyperlipidemia, vitamin deficiency, edema and hypokalemia.

The current "Resident Functional Capacity Screen" (FCS) dated 01/11/23 recorded the resident as independent with toileting, transfer, walk/ mobility and eating, required physical assistance with bathing and dressing, and was unable to manage her medications and treatments. The FCS recorded R1 was usually continent, had short- and long-term memory impairment, impaired memory/ recall and impaired decision making, R1 was usually understandable and usually understood. The FCS further recorded R1 was at risk for falls/ unsteadiness, had impaired vision and hearing and used a walker for ambulation.

The current "Negotiated Service Agreement" (NSA) dated 01/12/23 recorded facility staff assisted R1 twice a week with bathing, assisted with dressing and hair care and assisted with oxygen use. The NSA recorded facility staff managed R1's medications and monitored vital signs and weight checks and R1 required reminders from staff. R1 received oxygen services from an outside provider. The NSA

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S3165	Continued From page 11	S3165		

lacked documentation for party responsible for payment for the oxygen services. The NSA lacked description for risk for falls/ unsteadiness and impaired vision and hearing.

The current "Service Plan" dated 05/17/24 recorded R1 received supervision with showering, standby assistance with dressing and failed to identify medication administration.

The NSA lacked the name of the current licensed nurse responsible for the implementation of the health care service plan.

- R2's "Medical Record" revealed he admitted to the facility on 10/23/21 with diagnoses of anemia, carpal tunnel syndrome, depression, chronic obstructive pulmonary disease, gout, asthma and insomnia.

The current "Resident Functional Capacity Screen" (FCS) dated 01/17/23 recorded the resident as independent with bathing, dressing, toileting, transfers, walk/mobility and eating. The FCS recorded R1 required physical assistance with management of medications and treatments. The FCS further recorded R2 was usually continent, had impaired vision and had socially inappropriate behavior.

The current "Negotiated Service Agreement" (NSA) dated 01/17/23 recorded facility staff monitored vital signs and weight. The NSA recorded R2 received oxygen services from an outside provider but lacked documentation of party responsible for payment of the outside provider. The NSA lacked documentation for party responsible for medication administration and further lacked documentation for impaired vision, hearing and socially inappropriate

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S3165	Continued From page 12 behavior. The NSA lacked the name of the current licensed nurse responsible for the implementation of the health care service plan. The "Service Plan" dated 05/17/24 recorded R2 received supervision with showering, standby assistance with dressing, and failed to identify medication administration. Interview on 06/25/24 at 02:02 PM with Administrator A confirmed the NSA documents lacked the current licensed nurse responsible for the implementation of the health care service plan on 3 of 3 sampled residents. Facility failed to provide a policy on negotiated service agreements. Administrator A failed to ensure the negotiated service agreement contained the name of the licensed nurse responsible for the implementation and supervision of the health service plan, which had the potential to affect all residents.	S3165		
S3215 SS=D	26-41-205 (h) Medication Storage (h) Storage. Licensed nurses and medication aides shall ensure that all medications and biologicals are securely and properly stored in accordance with each manufacturer ' s recommendations or those of the pharmacy provider and with federal and state laws and regulations. (1) Licensed nurses or medication aides shall store non-controlled medications and biologicals managed by the facility in a locked medication room, cabinet, or medication cart. Licensed	S3215		

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S3215	Continued From page 13 nurses and medication aides shall store controlled medications managed by the facility in separately locked compartments within a locked medication room, cabinet, or medication cart. Only licensed nurses and medication aides shall have access to the stored medications and biologicals. (2) Each resident managing and self-administering medication shall store medications in a place that is accessible only to the resident, licensed nurses, and medication aides. (3) Any resident who self-administers medication and is unable to provide proper storage as recommended by the manufacturer or pharmacy provider may request that the medication be stored by the facility. (4) A licensed nurse or medication aide shall not administer medication beyond the manufacturer ' s or pharmacy provider ' s recommended date of expiration. This REQUIREMENT is not met as evidenced by: KAR 26-41-205 (h) The census equaled 7 residents. The sample included 3 residents. Based on observation, interview and record review for all residents living in the facility and receiving medication services, Administrator A failed to ensure medications and biologicals were securely and properly stored in accordance with each manufacturer's recommendations or those of the pharmacy provider and with federal and state laws and regulations. Findings included:	S3215		

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S3215	Continued From page 14 - Observation on 06/25/24 at 02:07 PM with Certified Medication Aide (CMA) C revealed a locked medication drawer in R2's room. The drawer contained a medication cup, which contained Tylenol tablets reading "GC 101" on each tablet. The tablets were open to air. CMA C performed a medication count, which revealed 51 tablets. CMA C stated R2 frequently refused his evening medication administration of Tylenol. Review of R2's current June 2024 Medication Administration Record (MAR) revealed Tylenol 325 milligrams, 2 tablets by mouth in the evening for pain. Tylenol had been marked as "2" meaning refused by R2, a total of sixteen times from 06/01/24 to 06/24/24. Interview on 06/25/24 at 03:00 PM with Administrator A confirmed Tylenol in R2's room should have been destroyed instead of placed in a medication cup in his medication drawer. Facility's "Medication Labeling and Storage- AL" policy (no date) recorded, "1. Medications and biologicals are stored in the packaging, containers or other dispensing systems in which they are received. Only the issuing pharmacy is authorized to transfer medication between containers. 2. The nursing staff is responsible for maintaining medication storage and preparation areas in a clean, safe, and sanitary manner. 3. If the facility has discontinued, outdated or deteriorated medications or biologicals, the dispensing pharmacy is contacted for instructions regarding returning or destroying these items." Administrator A failed to ensure medications and biologicals were securely and properly stored in accordance with each manufacturer ' s recommendations or those of the pharmacy	S3215		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N012001	A. BUILDING: _____ B. WING _____	06/25/2024

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S3215	Continued From page 15 provider and with federal and state laws and regulations.	S3215		
S3310 SS=F	26-41-207 (b) (5-6) (c) Infection Control Policies (b) (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 (c) Each administrator or operator shall ensure the facility ' s compliance with the department ' s tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105 This REQUIREMENT is not met as evidenced by: K.A.R 26-41-207 (c) The census totaled 7 residents. The sample included 3 residents and review of 1 newly hired employee. Based on record review and interview for 1 of 3 sampled residents (R)3 and 1 of 1 sampled staff (Certified Medication Aide (CMA) D), the facility failed to ensure compliance with the State Agency's tuberculosis (TB) guidelines. Findings included: - R3's "Health Record" revealed she admitted to the facility on 03/29/24 and the record lacked	S3310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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S3310	Continued From page 16 completion of the second step of TB testing upon admission. - Review of CMA D's employee record revealed they hired onto the facility on 03/01/24. CMA D's record lacked completion of the second step of TB testing upon hire. Interview on 06/25/24 at 01:46 PM with Administrator A confirmed CMA D did not receive a second step TB testing upon hire. Interview on 06/25/24 at 01:59 PM with Administrator A confirmed R3 did not receive a second step TB testing upon hire. Facility's "tuberculosis, Employee Screening for" policy (no date) recorded, "Each newly hired employee is screened for LTBI and active TB disease after an employment offer has been made but prior to the employee's duty assignment." Facility's "tuberculosis, Screening Residents for" policy (no date) recorded, "This facility shall screen all residents for tuberculosis infection and disease (TB)." The facility failed to ensure compliance with the State Agency's tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105, which had the potential to affect all residents.	S3310		