Kansas Department on Aging

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | N043004 | A. BUILDING: _____ B. WING _____ | 04/03/2014 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| VINTAGE PARK AT HOLTON LLC | 410 JUNIPER DR HOLTON, KS 66436 |

| (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<br><br>The following citations represent the findings of a Licensure Resurvey at the above named Assisted Living Facility in Holton, Kansas on 4/02/14 and 4/03/14. | S 000 | | |
| S3105 SS=D | 26-41-202 (j) Negotiated Service Agreement Outside Resource<br><br>(j) If a resident's negotiated service agreement includes the use of outside resources, the designated facility staff shall perform the following:<br>(1) Provide the resident, 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, with a list of providers available to provide needed services;<br>(2) assist the resident, if requested, in contacting outside resources for services; and<br>(3) monitor the services provided by outside resources and act as an advocate for the resident if services do not meet professional standards of practice<br><br>This REQUIREMENT is not met as evidenced by:<br>KAR 26-41-202(i)<br><br>The census equalled 40 the sample included three Residents. Based on observation, interviews, and reviews of records, for one of two sampled with outside provider services (#185), designated facility staff failed to monitor the services provided by the outside resources and act as an advocate if the services did not meet professional standards of practice.<br><br>Findings included: | S3105 | | |

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

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| S3105 | Continued From page 1<br><br>- Review of record on 4/02/14 revealed #185 admitted to facility 3/14/14 with diagnoses of Left hip repair, Hypothyroidism, Osteoarthrosis, Osteoporosis, Malignant Neo colon, Diarrhea, Vertigo, and Seasonal allergies.<br>The FCS (functional capacity screen) of 3/14/14 assessed #185 in need of physical assistance with bathing, independent in all other activities of daily living.<br>The NSA (negotiated service agreement) of 3/14/14 documented #185 to have standby assistance in and out of shower, independently washing.<br>The medical record contained a 3/14/14 form titled "Medical Exam" that contained hospital discharge/facility admission orders, including an order to "Evaluate and Treat as Indicated" (regarding therapies).<br>The medical record contained a 3/18/14 "Physician Notification and Response" fax form, signed by physician, with clarification order: PT/OT (physical therapy/occupational therapy) evaluate and treat; Diagnosis for therapies - Left Hip Fracture.<br>The medical record lacked evidence of therapy services provided to #185 since 3/14/14 admission.<br><br>On 4/02/14 at 6:00pm, Facility Nurse confirmed the order received to provide PT/OT evaluation and treatment... stated I don't know that they (therapists) came... Facility nurse searched medical record and papers to be filed with no documentation recovered to indicate therapy services initiated or received by #185 in facility. Facility Nurse stated they (therapists) never came out... I will have to call them tomorrow and see why no therapy started... confirmed PT/OT not included on the NSA. | S3105 | | |

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| S3105 | Continued From page 2<br><br>Designated facility staff failed to monitor the services to be provided to #185 by the outside resource for PT and OT, and failed to act as an advocate when the services did not occur and did not meet professional standards of practice. | S3105 | | |