STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N046052	A. BUILDING: _____ B. WING _____	08/04/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE LEAWOOD STATE LINE	12724 STATELINE ROAD LEAWOOD, KS 66209

(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 are the result of Complaint Investigations #112494, #111959, and #111668 at the above named Residential Health Care Facility on 7/31/17, 8/01/17, 8/02/17, 8/03/17, and 8/04/17.	S 000		
S3101 SS=E	26-41-202 (h) NSA Signatures (h) Each individual involved in the development of the negotiated service agreement shall sign the agreement. The administrator or operator shall ensure that a copy of the initial agreement and any subsequent revisions are provided to the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: KAR 26-41-202(h) The census equalled 33 the sample included two Residents. Based on reviews of records and interviews, for one of two sampled (#1), the Operator failed to ensure each individual involved in the development of the negotiated service agreement/health service plan (NSA/HSP) signed the agreement. Findings included: - Review of record revealed #1 admitted to facility 5/22/15 with diagnoses of Dementia, Osteoarthritis, Major depressive disorder, Anxiety, Acute pain, Long term aspirin use, and Epistaxis. The current functional capacity screen of 7/06/17 assessed #1 in need of physical assistance with	S3101		

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

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S3101	Continued From page 1	S3101		

bathing, transfers, mobility; in need of supervision with dressing, toileting; independent with eating; unable to perform medication management; (treatment management and bladder continence left blank); with impaired long term memory, memory recall, and decision making; used wheelchair, wandering.

The record contained an NSA/HSP with date completed "7/06/17." This NSA/HSP lacked signature of the Resident or the Resident's legal representative. The NSA/HSP contained the signature of the Facility Nurse #C. The record lacked evidence of attempts to obtain the signature of the Resident or the legal Representative.

On 8/01/17 at 2:15pm, legal representative of #1 stated he/she received a call "yesterday" on 7/31/17 to sign papers for dismissal from physical therapy... I was not aware #1 was getting therapy, I don't know when therapy started... I believe there is also a care plan (NSA/HSP) there at the facility for me to sign... notified me last week or week before... I don't know if any changes were made... they will show me that when I come to sign it... no calls before the new plan made so do not know if any changes from the previous plan...

Record review revealed an additional NSA/HSP dated 01/16/17. This NSA/HSP also lacked signature of the Resident or the Resident's legal. This NSA/HSP contained the signature of the previous Facility Nurse #G. The signature line for Resident/Legal Representative contained the notation "collaborated with Durable Power of Attorney." The record lacked documentation of the date or time of the collaboration, lacked intent to get signature on the NSA/HSP, and lacked any attempts to obtain the signature since 01/16/17.

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S3101	Continued From page 2 On 8/01/17 at 3:05pm, Facility Nurse #C and Executive Director #A confirmed NSA/HSP's of 01/16/17 and 07/06/17 each lacked signature of Resident or Resident's legal representative, and medical record lacked documentation of collaboration and attempts to obtain signature. The Operator failed to ensure each individual involved in the development of the NSA/HSP for #1 signed the agreement.	S3101		
S3171 SS=E	26-41-204 (i) Health Care Services Standards of Practice (i) All health care services shall be provided to residents by qualified staff in accordance with acceptable standards of practice. This REQUIREMENT is not met as evidenced by: KAR 26-41-204(i) The census equalled 33 the sample included two Residents. Based on interviews and reviews of records, for one of two sampled (#1), the Operator failed to ensure all health care services, including: Assessment and monitoring of Resident in relation to head injury, Notification of legal representative, Timely notification of physician for treatment orders, Prompt procurement of medical testing, and, Collaboration with legal representative for therapy services, all provided by qualified staff in accordance with	S3171		

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S3171	Continued From page 3 acceptable standards of practice. Findings included: - Review of record revealed #1 admitted to facility 5/22/15 with diagnoses of Dementia, Osteoarthritis, Major depressive disorder, Anxiety, Acute pain, Long term aspirin use, and Epistaxis. The current functional capacity screen (FCS) of 7/06/17 assessed #1 in need of physical assistance with bathing, transfers, mobility; in need of supervision with dressing, toileting; independent with eating; unable to perform medication management; (treatment management and bladder continence left blank); with impaired long term memory, memory recall, and decision making; used wheelchair, wandering. The record contained a negotiated service agreement/health service plan (NSA/HSP) dated 01/16/17. This NSA/HSP not signed by Resident or Resident's legal representative, included an undated note "collaborated with DPOA" (durable power of attorney). The NSA/HSP recorded interventions of: Medication management (including Aspirin therapy which may cause increased bleeding and or bruising that may not otherwise occur in people who do not receive this medication) Management of Major Neurocognitive Disorder, dementia, anxiety, insomnia, depression Meal service, Supervision of dressing and changing clothes, Verbal reminders and prompts for showering, Observation and monitoring for fall prevention, Assistance with proper decision making, and Social support for beliefs and behaviors.	S3171		

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S3171	Continued From page 4 The record contained an NSA/HSP with date completed "7/06/17." This NSA/HSP, not signed by Resident or Resident's legal representative, documented interventions to meet the identified needs of the FCS. The medical record Resident Log Notes (RLN) described an 02/19/17 event that resulted in injury to #1: Entry without date or time: "According to evening CMA (certified medication aide) #1's family brought #1 back from outing and stated #1 had fell in parking lot there was a bruise and redness on chin he/she gave him/her ice paks and took vitals... he/she (#1) stated wasn't hurting put on 24 hour vitals and as #1 was sleeping when I got here will do complete assessment in morning" The medical record lacked evidence of family notification upon being informed of Resident's fall and injury. The medical record lacked the time #1 returned to facility and the status of #1 upon return (licensed nurse assessment), in accordance with acceptable standards of practice. By review of the Resident sign out/sign in record at front door, Resident returned to facility at 8:20pm. The medical record lacked evidence of physician notification at time of fall and injury and inquiry for treatment orders. The record contained a fax to physician on 02/20/17 at 5:22am - "he/she fell when was with family in parking lot, back two hours after fell has redness and bruise on chin and over cheeks Neuro checks WNL (within normal limits) will continue to monitor for any changes"	S3171		

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S3171	Continued From page 5 The medical record lacked evidence of evaluation and monitoring of an individual with a head injury, to include arousal at intervals, determination of orientation, level of pain, motor coordination, etc. in accordance with acceptable standards of practice. On 8/01/17 at 10:30am, Licensed Nurse #D stated I came in about 10:45pm... I made the progress note entry... #1 was asleep when I got here... I charted what the evening CMA (certified medication aide) told me because they are not allowed to chart... #1 slept all night... didn't want to wake him/her because wouldn't go back to sleep, I slightly roused and he/she turned away like leave me alone, I used that as basis that he/she was doing OK... not really sure what time he/she returned to facility... did Neuro Checks the next morning before I left... touched jaw area, he/she replied "sore"... did not document appearance of injuries or assessment... The next Progress Note entries of record: 02/20/17 - 10:56 - "Resident on fall follow-up. Resident refused to leave room for breakfast advised him/her needs to come for lunch no complaint of pain will continue to monitor" 02/20/17 - 1327 - "Received order for facial bone xray" 02/20/17 - 2215 - ...continues on fall follow-up no complaint of pain unless touching chin/neck. Waiting on mobile xray to complete facial X-rays... acetaminophen given with evening meal. Will continue to monitor for changes... ice offered, refused... 02/21/17 - 0600 - ...no signs of pain or distress related to fall noted at this time continue to monitor for changes... 02/21/17 - 1102 - ...no complaint of pain awaiting	S3171		

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S3171	Continued From page 6	S3171		

xray will continue to monitor
02/21/17 - 2200 - ...continues on fall follow-up denies pain/discomfort at this time... awaiting xray will continue to monitor...
02/22/17 - xray performed awaiting results

The medical record lacked evidence of licensed nurses notification of physician due to delay of xray. The record lacked licensed nurses inquiring to delay in ordered X-Ray treatment in accordance with standards of practice. The record lacked follow-up and resolution of the testing results and healing of #1's injuries in accordance with standards of practice.

By review, #1 experienced an unrelated fall on 6/14/17:

6/14/17 - 1500 - ...at approximately 1430 #1 who was on outing with Activities Director fell out of golf cart... he/she didn't wait for it to stop... left message for family to call back... no abrasion noted... when he/she bend at 30 degrees says it hurts not wanting to put weight on left leg... will have NP see tomorrow continue to monitor for changes
6/15/17 - 0900 - knee hurting wrapped and gave Tylenol will continue to monitor for any changes
6/16/17 - 0150 - xray negative... ordered Biofreeze... PT and OT (physical therapy and occupational therapy) to evaluate
6/16/17 - 1200 - ...NP seen has Tylenol scheduled... getting topical...
6/23/17 - 1650 - ...continue Tylenol three times daily for 14 days per NP...
Entry lacked a date, lacked a time - NP orders xray of knees, hip, pelvis, venous Doppler...
6/28/17 - 1130 - xray obtain per order patient complains of discomfort
6/28/17 - 1245 - obtain results no fracture or

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S3171	Continued From page 7	S3171		

dislocation... fax to physician will follow up with family am
7/07/17 - 1630 - continue acetaminophen three times daily... will have Facility Nurse #C make appointment with "ortho" (
7/14/17 - 2000 - has appointment August 2 with ortho...
7/27/17 - 2000 - NP put Biofreeze back on routine three times daily related to pain in knees...

The medical record lacked ongoing assessments of Resident by a licensed nurse, at the time of the fall, and in response to treatments and interventions in accordance with standards of practice.
The medical record lacked evidence of contact with the Legal Representative in regard to the fall, injury, and initiation of therapy services.

Review of facility policy and procedure titled "Head Injury Policy" indicated:
If no access to Physician, Nurse Practitioner, or Physician's Assistant, Home Health, or Hospice... Heath and Wellness Director or Nurse designee to contact legal representative to explain and inform of situation... if not able to contact in one hour, call 911 and send to emergency room...
This policy failed to direct specific assessment of Resident if still in facility under staff care.

On 8/01/17 at 1:05pm, Executive Director #A and Health and Wellness Director #C confirmed the medical record entries lacked times, dates, assessment information... follow up... notifications of family and physician at intervals... confirmed xray ordered but delay not researched... stated multiple family contacts took place but confirmed none of that information documented... confirmed a post investigation of the incident not available.

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S3171	Continued From page 8 The Operator failed to ensure all health care services provided to #1 by qualified staff in accordance with acceptable standards of practice.	S3171		
S3261 SS=E	26-41-105 (f) (11) Resident Record Documentation of Incidents (f) (11) documentation of all incidents, symptoms, and other indications of illness or injury including the date, time of occurrence, action taken, and results of the action This REQUIREMENT is not met as evidenced by: KAR 26-41-105(f) The census included 33 the sample included two Residents. Based on interview and review of record, for one of three sampled (#1) on multiple occasions, the Operator failed to ensure the Resident record contained documentation of all incidents, symptoms and other indications of illness or injury, including the date, time of occurrence, action taken, and results of the action. Findings included: - Review of record revealed #1 admitted to facility 5/22/15 with diagnoses of Dementia, Osteoarthritis, Major depressive disorder, Anxiety, Acute pain, Long term aspirin use, and Epistaxis. The current functional capacity screen (FCS) of	S3261		

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S3261	Continued From page 9 7/06/17 assessed #1 in need of physical assistance with bathing, transfers, mobility; in need of supervision with dressing, toileting; independent with eating; unable to perform medication management; (treatment management and bladder continence left blank); with impaired long term memory, memory recall, and decision making; used wheelchair, wandering. The record contained an NSA/HSP with date completed "7/06/17." This NSA/HSP, not signed by Resident or Resident's legal representative, documented interventions to meet the identified needs of the FCS. The medical record Resident Log Notes (RLN): 01/19/17 - 1900 - entry described visit by NP (nurse practitioner) The next entry of record lacked a date, lacked a time: "According to evening CMA (certified medication aide) #1's family brought #1 back from outing and stated #1 had fell in parking lot there was a bruise and redness on chin he/she gave him/her ice paks and took vitals... he/she (#1) stated wasn't hurting put on 24 hour vitals and as #1 was sleeping when I got here will do complete assessment in morning" (documentation lacked date/time of contact regarding fall, date/time of return to facility, assessment of Resident at time of return to facility, assessment of facial injuries and evaluation of head injury by licensed staff, notifications of physician and family, Resident's response to actions taken) The next entry of record lacked a date, lacked a time: "Neuro checks normal" (documentation lacked date, time, actions taken,	S3261		

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S3261	Continued From page 10 Resident's response to actions) The next entry of record: 02/20/17 - 10:56 - "Resident on fall follow-up. Resident refused to leave room for breakfast advised him/her needs to come for lunch no complaint of pain will continue to monitor" (documentation lacked actions taken, results of actions) The next entries of record: 02/20/17 - 1327 - "Received order for facial bone xray" (documentation lacked origin of order, lacked notification or contact with physician and family, lacked assessment by licensed nurse of head injury, facial injuries) 02/20/17 - 2215 - ...continues on fall follow-up no complaint of pain unless touching chin/neck. Waiting on mobile xray to complete facial X-rays... acetaminophen given with evening meal. Will continue to monitor for changes... ice offered, refused... 02/21/17 - 0600 - ...no signs of pain or distress related to fall noted at this time continue to monitor for changes... 02/21/17 - 1102 - ...no complaint of pain awaiting xray will continue to monitor (documentation lacked inquiry to reason for xray not completed, lacked contact with physician or family) 02/21/17 - 2200 - ...continues on fall follow-up denies pain/discomfort at this time... awaiting xray will continue to monitor... 02/22/17 - xray performed awaiting results (documentation lacked results of xray, contact with family or physician, resolution or healing of injuries) Next entry in record: 5/12/17 - 1500 - visit from APRN (advanced	S3261		

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S3261	Continued From page 11	S3261		

practice registered nurse) no new orders
6/14/17 - 1500 - ...at approximately 1430 #1 who was on outing with Activities Director fell out of golf cart... he/she didn't wait for it to stop... left message for family to call back... no abrasion noted... when he/she bend at 30 degrees says it hurts not wanting to put weight on left leg... will have NP see tomorrow continue to monitor for changes (documentation lacked notification of physician and family, lacked assessment of Resident by licensed nurse)
6/15/17 - 0900 - knee hurting wrapped and gave Tylenol will continue to monitor for any changes (documentation lacked assessment by licensed nurse, lacked contact with physician or family)
6/16/17 - 0150 - xray negative... ordered Biofreeze... PT and OT (physical therapy and occupational therapy) to evaluate... (documentation lacked contact with family)
6/16/17 - 1200 - ...NP seen has Tylenol scheduled... getting topical... (documentation lacked results of actions)
6/23/17 - 1650 - ...continue Tylenol three times daily for 14 days per NP... (documentation lacked results of actions, notification of family)

Next entry in record:
Lacked a date, lacked a time - NP orders xray of knees, hip, pelvis, venous Doppler...

6/28/17 - 1130 - xray obtain per order patient complains of discomfort (documentation lacked assessment by licensed nurse, contact with family)
6/28/17 - 1245 - obtain results no fracture or dislocation... fax to physician will follow up with family am (documentation lacked notification of family)
7/07/17 - 1630 - continue acetaminophen three times daily... will have Facility Nurse #C make

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S3261	Continued From page 12 appointment with "ortho" (documentation lacked assessment by licensed nurse, actions taken, results of actions) 7/14/17 - 2000 - has appointment August 2 with ortho... 7/27/17 - 2000 - NP put Biofreeze back on routine three times daily related to pain in knees... On 8/01/17 at 10:30am, Licensed Nurse #D confirmed no date or time on entries he/she completed 02/19/17 and 02/20/17... confirmed documentation lacked full assessment of #1. On 8/01/17 at 1:05pm, Executive Director #A and Health and Wellness Director #C confirmed the medical record entries lacked times, dates, assessment information, actions taken, results of actions (follow up) and notifications of family and physician at intervals. The Operator failed to ensure #1's record contained documentation of all incidents, symptoms and other indications of illness or injury, including the date, time of occurrence, action taken, and results of the action.	S3261		