STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N050011	A. BUILDING: _____ B. WING _____	05/18/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODRIDGE ESTATES	329 N KAY LANE PARSONS, KS 67357

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S 000	INITIAL COMMENTS The following citations represent the findings of resurvey at the above named facility on 5-10-17, 5-11-17, 5-17-17, and 5-18-17.	S 000		
S3155 SS=E	26-41-204 (a) Health Care Services . (a) The administrator or operator in each assisted living facility or residential health care facility shall ensure that a licensed nurse provides or coordinates the provision of necessary health care services that meet the needs of each resident and are in accordance with the functional capacity screening and the negotiated service agreement. This REQUIREMENT is not met as evidenced by: KAR 41-204(a) The facility identified a census of 21 residents. The sample included 3 residents. Based on record review, interview, and observations for 2 (#111 and #333) of 3 resident sampled, the operator/licensed nurse failed to ensure a licensed nurse provided or coordinated the provision of necessary Health Care Services (HCS) that meet the needs of each resident and are in accordance with the Functional Capacity Screen (FCS) and Negotiated Service Agreement (NSA). Findings included: - Record review for resident #111 revealed an admit date of 9-26-16 with diagnoses of dementia, atrial fibrillation, hypertension,	S3155		

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

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S3155	Continued From page 1	S3155		

hypothyroidism, and anemia.

The FCS dated 10-6-16 and 4-5-17 recorded resident independent with bathing toileting, transfer, walking/mobility, eating, cognition, decision making, required physical assistance with dressing, experienced falls/unsteadiness and impaired vision.

The NSA/HCS dated 10-6-16 recorded resident independent with bathing grooming, dressing and undressing, toileting, transfer, and ambulation with walker.

The NSA/HCS lacked interventions for falls/unsteadiness.

The NSA/HCS dated 4-4-17 recorded resident independent with bathing, grooming, toileting, transfer, ambulation with walker, dressing, assist with putting on socks, shoes and TED hose. Resident fall risk, check every two hours, keep room free of obstacles, life line, call bell in reach, and night light.

The interdisciplinary notes recorded the following:

10-6-16 at 8:00 a.m. resident admitted to facility. Signed operator/licensed nurse A

10-19-16 at 10:35 a.m.,"The house keeper observed resident in room pushing walker, carrying a cup, lost balance, fell hitting the left side of face over and below left eye. Noted, 'bleeding readily', and pressure applied. Skin pulled as close as possible into position. Ice applied and dressed with gauze. Family notified and stated he/she would see to it when he/she takes resident to doctor appointment at noon." Signed by licensed nurse H.

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S3155	Continued From page 2 10-19-16 at 5:45 resident returned to facility with, "nine stitches in head". Signed certified staff G. 10-20-16 at 11:30 a.m., "Resident went to emergency room in another town for the laceration forehead. Apparently resident had ruptured a vessel and it would not stop bleeding (while family taking resident to another doctor appointment). CT scan of head and x-rays of ribs done. Resident then proceeded to a physician appointment to rule out cancer on nose. Biopsy done. To dress wound with neosporin." Signed operator licensed nurse A. Signed operator/licensed nurse A. No further nursing assessment recorded in notes related to fall. 2-23-17 at 11:00 a.m. Emergency Medical Services (EMS) showed up and stated that a resident fell in room. Resident was sitting on the bathroom floor. Resident stated lost balance, fell, and did not hurt self. EMS checked resident over and asked if he/she wanted to go to the emergency room and he/she refused. Aides to walk resident to and from meals until he/she feel more comfortable. Operator/licensed nurse A notified. No further nursing assessment recorded in notes related to fall. The HCS lacked interventions for falls/unsteadiness. 2-28-17 at 10:00 p.m., "Resident at present needs assist with all Activities of Daily Living (ADL's)." Signed certified staff J. 3-5-17 at 7:15 p.m. certified staff walking by resident's room, looked in and observed resident	S3155		

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S3155	Continued From page 3	S3155		

on floor at foot of bed. Resident stated was not hurt, put light on so staff could get some assistance, looked resident over to see if cuts or abrasions and did not see any. Blood Pressure 176/116, Pulse 90, Respirations 18, called operator/licensed nurse A and gave report. Operator/licensed nurse A advised that we could get resident up. Medication aide and I assisted resident up and assisted to recliner. Will monitor. Signed certified staff J.

3-6-17 at 5:45 a.m. Resident pulled call light several times needing help to bathroom. Will continue to observe. Signed certified staff K.

3-17-17 at 10:00 a.m. Resident pushed lifeline when nurse went to check on resident found him/her on the floor of bathroom with the light off and walker turned over. Resident stated was not sure if he/she was hurt or not. When we moved resident he/she yelled out in pain. EMS called and resident was transferred to hospital where it was determined he/she had a broken hip. Signed operator/licensed nurse.

4-5-17 at 11:30 a.m. resident returned from hospital and up with walker. Signed operator/licensed nurse A.

Interview on 5-10-17 at 2:15 p.m. with operator/licensed nurse A stated all investigations of falls/injuries are documented in the interdisciplinary notes. Operator/Licensed nurse A stated he/she did not implement interventions after fall or injury in the HCS and amended NSA/HCS annually and with significant changes only.

On 5-10-17 at 11:35 a.m. observed resident #111 sitting at dining room table visiting with other

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S3155	Continued From page 4	S3155		

residents. Walker near resident.

Interview on 5-10-17 at 12:30 p.m. with certified staff E stated resident used wheelchair for long distance and can ambulate with walker with stand by assistance.

For resident #111, the operator/licensed nurse failed to ensure a licensed nurse provided or coordinated the provision of necessary HCS that meet the needs of each for falls.

- Record review for resident #333 revealed an admit date of 1-29-14 with diagnoses of non-insulin dependent diabetic, atrial fibrillation, osteoporosis, hypertension, and anxiety.

The FCS dated 2-2-16 and 2-2-17 recorded resident unable to manage medications, treatments, experienced short term memory loss, memory recall, long term memory, decision making and impaired decision making.

The NSA/HCS dated 2-2-16 recorded staff to administer medications, manage medications and treatments.

The amended NSA/HCS dated 1-19-17 recorded resident required assistance with dressing especially lower extremities, help with putting on the shoes with Velcro.

The NSA/HCS dated 2-2-17 recorded staff to administer medications, manage medications and treatments. The NSA/HCS lacked interventions for short-term memory loss, memory recall, long term memory loss, decision making and impaired decision making.

The medication administration record (MAR)

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S3155	Continued From page 5 lacked documentation of treatment administered. Interview on 5-11-17 at 12:40 p.m. with operator/licensed nurse stated home health started providing wound care to left great toe, second toe, and third toe due to resident getting burns from a heating pad and had not observed wounds in last few weeks. The operator/licensed nurse stated and confirmed the NSA/HCS lacked interventions for burns on left great toe, second and third toes or instructions from home health. The record also lacked documentation from home health of treatment provided. On 5-11-17 at 12:45 observed resident #333 ' s left foot. The great toe had a dressing on it. The operator/licensed nurse removed the dressing and observed a one centimeter dark black area at end of great toe. Resident stated the wound is much better and areas on second and third toes healed. For resident #333, the operator/licensed nurse failed to ensure a licensed nurse provided or coordinated the provision of necessary HCS that meet the needs of each for wound care and outside provider for wound care.	S3155		
S3296 SS=F	26-41-206 (c) (1) Dietary Services Weekly Menu (c) (1) Menu plans shall be available to each resident on at least a weekly basis. This REQUIREMENT is not met as evidenced by: KAR 26-41-206(c)	S3296		

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S3296	Continued From page 6 The facility identified a census of 21 residents. The sample included 3 residents. Based on observations and interviews for all residents, the operator/licensed nurse failed to ensure menu plans shall be available to each resident on at least a weekly basis. Findings included: - On 5-10-17 at 9:45 a.m. observed a white marker board on wall with lunch written on it. The marker board recorded fajita chicken salad and peach dump cake. Interview on 5-10-17 at 10:05 a.m. with dietary staff B stated he/she kept weekly menus in notebook in kitchen. Dietary staff B stated weekly menus are not given to residents because each meal is posted on marker board daily. Interview on 5-10-17 at 2:35 p.m. with resident #333 stated he/she did not know what food was being served except what was identified on the board daily. For all residents, the operator/licensed nurse failed to ensure menu plans shall be available to each resident on at least a weekly basis.	S3296		
S3420 SS=F	28-39-256 MECHANICAL REQUIREMENTS (c) Mechanical requirements. (1) Heating, air conditioning, and ventilating systems. (A) The system shall be designed to maintain a year-round indoor temperature range of 70oF or 21oC to 85oF or 26oC.	S3420		

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S3420	Continued From page 7 (B) Each apartment or individual living unit shall allow the resident to control the temperature. (2) Plumbing and piping systems. (A) Backflow prevention devices or vacuum breakers shall be installed on fixtures to which hoses or tubing can be attached. (B) Water distribution systems shall be arranged to provide hot water at outlets at all times. The temperature of hot water shall range between 98oF and 120oF at bathing facilities, sinks, and lavatories in resident use areas. (3) Electrical requirements. (A) All spaces occupied by persons or machinery and equipment within the buildings, approaches to buildings, and parking lots shall have adequate lighting. (B) Minimum lighting intensity levels shall be as required in Table 1. (C) Each corridor and stairway shall remain lighted at all times. (D) Each light in resident use areas shall be equipped with shades, globes, grids, or glass panels. This REQUIREMENT is not met as evidenced by: KAR 28-39-256(c) (2) (B) The facility reported a census of 21 residents.	S3420		

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S3420	Continued From page 8 The sample included 3 residents. Based on observation, interview and record review for all residents, the operator/licensed nurse failed to ensure the water distribution system provided hot water to all bathing facilities, sinks, and lavatories in resident use areas at a temperature range of 98 degrees Fahrenheit (F) to 120 degrees F. Hot water temperatures measured at a range from 125.6 degrees F to 125.7 degrees F in public restroom, and beauty shop, Findings included: - Review of the resident roster on 5-10-17 at 12:55 p.m. revealed 9 of 21 residents experienced impaired cognition, 2 of 21 residents required assistance to toilet, and 19 of 21 residents independent with toileting. On 5-10-17 at 12:55 p.m. calibrated thermometer revealed hot water in public restroom at 125.6 degrees F. On 5-10-17 at 12:57 p.m. thermometer revealed hot water in beauty shop at 125.7 degrees F. On 5-10-17 at 1:00 p.m. informed operator/licensed nurse and maintenance staff of hot water readings in public restroom and beauty shop. Maintenance staff stated he/she would go turn down hot water temperature. Interview on 5-11-17 at 11:00 a.m. with operator/licensed nurse stated the water in public restroom and beauty shop hotter because it goes to kitchen and the licensed dietary consultant wanted the water to be hotter for the dishwasher. The hot water temperature in the public restroom and beauty shop is 113.0 degrees F at this time. The operator/licensed nurse provided a copy of	S3420		

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S3420	Continued From page 9 the hot water temperature logs that revealed a weekly check (no location or time of hot water check) of hot water. The operator/licensed nurse stated he/she had not checked hot water temperatures at any location since December of 2016. For all residents, the operator/licensed nurse failed to ensure the water distribution system provided hot water to all bathing facilities, sinks, and lavatories in resident use areas at a temperature range of 98 degrees F to 120 degrees F. Hot water temperatures measured at a range from 125.6 F to 125. 7 degrees F in public restroom, and beauty shop.	S3420		