STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N065004	A. BUILDING: _____ B. WING _____	08/13/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MORTON COUNTY SENIOR LIVING	500 4TH STREET ELKHART, KS 67950

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S 000	INITIAL COMMENTS The following citations represent the findings of an initial certification survey with a complaint #188378 at the above named Assisted Living conducted on 08/12/24 and 08/13/24.	S 000		
S3081 SS=D	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: 3081 26-41-201(c)(1) The facility reported a census of 14 residents. The sample included three residents. Based on interview, and record review the operator failed to ensure designated staff completed a "Functional Capacity Screen" (FCS) for resident (R)101 after she experienced a significant change in condition. Findings included: - R101's medical record revealed she moved into the facility on 08/27/22 with a diagnosis of a history of bilateral hip fractures.	S3081		

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

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S3081	Continued From page 1 The 08/22/22 FCS documented R101 was independent with transfers and required supervision with ambulation. The 08/23/23 FCS documented R101 required staff supervision with transfers and was independent with ambulation. On 08/13/24 at 03:34 PM "Certified Nurse Aide" (CNA) B stated R101 used to be able to transfer herself and ambulated with a walker. CNA B stated R101 now needed staff assistance using a gait belt and walker for transfers after she had a fall some time ago when she fractured her arm. On 08/13/24 at 03:44 PM Administrative Nurse A stated stated a significant change FCS was not completed after R101 fractured her right elbow after she fell. The operator failed to ensure a significant change FCS was completed for R101 after she had a fall and needed staff assistance with transfers.	S3081		
S3085 SS=F	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	S3085		

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S3085	Continued From page 2 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 by: 3085 26-41-202(a)(1) The facility reported a census of 14 residents with three residents included in the sample. Based on observation, interview, and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) was fully developed based on the resident's "Functional Capacity Screen" (FCS), service needs, and preferences for resident (R)101, R102 and R103. Findings included: - R101's medical record revealed she moved into the facility on 08/27/22. The 08/23/23 FCS identified R101 required staff supervision with transfers, experienced short term memory, memory/recall and decision-making deficits, had impaired vision, impaired hearing and inappropriate behavior. The 08/23/23 NSA failed to address R101's use of a bed assist device for transfers and did not address what services facility staff provided for impaired cognition, vision, hearing and inappropriate behavior.	S3085		

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S3085	Continued From page 3 An observation on 08/13/24 at 12:26 PM revealed a u-shaped bed assist device was found to be properly attached to the bed frame. On 08/13/24 at 03:44 PM Administrative Nurse A stated R101's NSA did not address all that triggered on her FCS. The operator failed to ensure R101's NSA was fully developed to include all items that triggered on the FCS, his service needs, and preferences. - R102's medical record revealed she moved into the facility on 02/20/24. The 02/20/24 FCS identified R102 was required supervision with transfers and triggered for falls. The 02/20/24 NSA did not identify that R102 used a bed assist device for transfers and did not address what services staff provided for fall interventions. An observation on 08/13/24 at 12:38 PM revealed a u-shaped" bed assist device in use in R102's apartment. On 08/13/24 at 04:56 PM stated R102's NSA did not address all that triggered on her FCS. The operator failed to ensure R102's NSA was fully developed to include all items that triggered on the FCS, her service needs, and preferences. - R103's medical record revealed she moved into the facility on 10/17/22. The 10/09/23 FCS identified R103 triggered for falls, impaired vision and impaired hearing.	S3085		

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S3085	Continued From page 4 The 10/09/23 NSA did not address what services staff provided R103 concerning falls, impaired vision or impaired hearing. An observation on 08/13/24 at 12:35 PM revealed R103 was independent with transfers and ambulation without the use of an assistive device. R103 wore glasses and did not appear to have difficulty hearing. On 08/13/24 at 05:00 PM Administrative Nurse A stated R103's NSA did not address all that triggered on the FCS. The operator failed to ensure R103's NSA was fully developed to include all items that triggered on the FCS, her service needs, and preferences.	S3085		
S3092 SS=D	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	S3092		

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S3092	Continued From page 5 by: 3092 26-41-202(d)(2) The facility reported a census of 14 residents. The sample included three residents. Based on interview, and record review the operator failed to ensure designated staff revised a "Negotiated Service Agreement" (NSA) for resident (R)101 after she experienced a significant change in condition. Findings included: - R101's medical record revealed she moved into the facility on 08/27/22 with a diagnosis of a history of bilateral hip fractures. The 08/23/23 NSA did not identify that R101 required staff assistance time two with transfers after fracturing her elbow resulting from a fall and did not address physical therapy services started after the fall. On 08/13/24 at 03:44 PM Administrative Nurse A stated a significant change NSA was not completed after R101 had a fall and experienced a significant change in condition. The operator failed to ensure a significant change NSA identified R101 required staff assistance time two with transfers and started physical therapy services after she fractured her elbow during a fall.	S3092		
S3101 SS=D	26-41-202 (h) NSA Signatures (h) Each individual involved in the development of	S3101		

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S3101	Continued From page 6 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: 3101 KAR 26-41-202(h) The facility reported a census of 14 residents. The sample included three residents. Based on interview, and record review the administrator failed to ensure the "Negotiated Service Agreement" (NSA) for resident (R)103 was signed by all individuals involved in the development of the NSA to include the resident or their legal representative. Findings included: - R103's medical record revealed she moved into the facility on 10/17/22. The 10/09/23 NSA documented signatures for the operator and the nurse but was not signed by R103 or her legal representative. On 08/13/24 at 05:00 PM Administrative Nurse A stated R103's NSA was not signed by the resident or her legal representative. The operator failed to ensure R103's NSA was signed by all individuals involved in the development of the NSA.	S3101		

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S3155	Continued From page 7	S3155		
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: 3155 KAR 26-41-204(a) The facility reported a census of 14 residents. The sample included three residents. Based on observation, interview and record review the operator failed to ensure a licensed nurse provided or coordinated the provision of necessary health care services to meet the needs for two of three sampled residents evidenced by the failure to complete and document an assessment for the purpose to use bed rails, ability to use bed rails safely without risk of entrapment, and to confirm the bed rails were not a restraint for Resident (R)101, and R102. Findings included: - R101's medical record revealed she moved into the facility on 08/27/22 with a diagnosis of a history of bilateral hip fractures.	S3155		

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S3155	Continued From page 8 The 08/23/23 "Functional Capacity Screen" (FCS) documented R101 required supervision with transfers and was independent with walking and used a walker. The 08/23/23 "Negotiated Service Agreement" documented R101 required staff assistance and used a walker for transfers and walking. Review of R101's medical records failed to locate an assessment for the use of a bed cane. An observation on 08/13/24 at 12:26 PM revealed a bed assist device was found to be properly attached to R101's bed frame. On 08/13/24 at 03:44 PM Administrative Nurse A stated R101 used a bed assist device but a bed rail assessment was not completed. The operator failed to ensure a licensed nurse provided or coordinated the provision of necessary health care services to meet the needs for R101 regarding the use of a bed assistive device. - R102's medical record revealed she moved into the facility on 02/20/24. The 02/20/24 FCS documented R102 was required supervision with transfers and mobility and listed the use of a walker. The 02/20/24 NSA did not address the use of a bed assist device. Review of R102's medical records failed to locate an assessment for the use of a bed cane.	S3155		

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S3155	Continued From page 9 An observation on 08/13/24 at 12:38 PM revealed a u-shaped bed assist device not properly attached to the bed frame in R102's apartment. On 08/13/24 at 03:38 PM Certified Nurse Aide B stated R102 was independent with transfers and walking and used a bed assist device. On 08/13/24 at 04:56 PM Administrative Nurse A stated a bed rail assessment was not completed for R102's use of a bed assist device. The operator failed to ensure a licensed nurse provided or coordinated the provision of necessary health care services to meet the needs for R102 regarding the use of a bed assistive device.	S3155		
S3165 SS=F	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: 3165 26-41-204(d) The facility reported a census of 14 residents with three residents included in the sample and one record review. Based on interview and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) identified the licensed nurse responsible for the	S3165		

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S3165	Continued From page 10	S3165		

implementation and supervision of the health care services plan for resident (R)101, R102 and R103.

Findings included:

- R101's medical record revealed the resident moved into the facility on 08/27/22.

R101's most recent NSA was completed on 08/23/23. R101's medical record did not include any addendum to the NSA to identify the current nurse responsible for the implementation and supervision of the health care services plan.

On 08/13/24 at 03:44 PM Administrative Nurse A stated there was no addendum completed to identify the current nurse responsible for the implementation and supervision of R101's health care service plan.

The operator failed to ensure R101's NSA identified the licensed nurse responsible for the implementation and supervision of the health care services plan.

- R102's medical record revealed the resident moved into the facility on 02/20/24.

R102's most recent NSA was completed on 02/20/24. R102's medical record did not include any addendum to the NSA to identify the current nurse responsible for the implementation and supervision of the health care services plan.

On 08/13/24 at 04:56 PM Administrative Nurse A stated there was no addendum completed to identify the current nurse responsible for the implementation and supervision of R102's health

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S3165	Continued From page 11 care service plan. The operator failed to ensure R102's NSA identified the licensed nurse responsible for the implementation and supervision of the health care services plan. - R103's medical record revealed the resident moved into the facility on 10/17/22. R103's most recent NSA was completed on 10/09/23. R103's medical record did not include any addendum to the NSA to identify the current nurse responsible for the implementation and supervision of the health care services plan. On 08/13/24 at 05:00 PM Administrative Nurse A stated there was no addendum completed to identify the current nurse responsible for the implementation and supervision of R103's health care service plan. The operator failed to ensure R103's NSA identified the licensed nurse responsible for the implementation and supervision of the health care services plan.	S3165		
S3211 SS=E	26-41-205 (g) (3) OVER THE COUNTER DRUGS (3) A licensed nurse or medication aide may accept over-the-counter medication only in its original, unbroken manufacturer ' s package. A licensed pharmacist or licensed nurse shall place the full name of the resident on the package. If the original manufacturer ' s package of an over-the-counter medication contains a medication in a container, bottle, or tube that can be removed from the original package, the	S3211		

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S3211	Continued From page 12 licensed pharmacist or a licensed nurse shall place the full name of the resident on both the original manufacturer ' s medication package and the medication container. This REQUIREMENT is not met as evidenced by: 3211 KAR 26-41-205 (g)(3) The facility reported a census of 14 residents. Based on observation the operator failed to ensure a licensed pharmacist or licensed nurse placed the full name of the resident on the original package of over the counter (OTC) medications for four residents. Findings included: - Observation on 08/13/24 at 11:20 AM revealed the facility's medication cart contained the following OTC medications which were not labeled with a resident's full name: Resident (R)105: One bottle of Rugby Regular Strength Acetaminophen R101: One bottle of Spring Valley Immune Plus Dietary Supplement One bottle of NOW Ashwagandaha 450 milligrams (mg). One eyedrop bottle of Refresh Gel Drops Lubricating eye gel R108:	S3211		

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S3211	Continued From page 13 Three bottles of Nutricia Pro-Stat Concentrated Protein Liquid R109: One bottle of Bausch and Lomb PreserVision AREDS2 One bottle of DG Health Regular Strength Pain Relief One bottle of Milk of Magnesia The medication overstock cabinet contained the following OTC medications that were not labeled with the resident's full name: R101: Six bottles of EyePromise Zeaxanthin+Lutein R108: Three bottles of Acetaminophen The operator failed to ensure all OTC medications were labeled by a pharmacist or licensed nurse with the resident's full name.	S3211		
S3213 SS=E	26-41-205 (g) (2) Medication Labeling (g) (2) Each prescription medication container shall have a label that was provided by a dispensing pharmacist or affixed to the container by a dispensing pharmacist in accordance with K.A.R. 68-7-14. This REQUIREMENT is not met as evidenced by: 3213 KAR 26-41-205 (g)(2)	S3213		

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S3213	Continued From page 14 The facility reported a census of 14 residents. Based on observation the operator failed to ensure each prescription medication container had a label provided by a dispensing pharmacist affixed to the container. Findings included: - Observation on 08/13/24 at 11:20 AM revealed the facility's medication cart contained the following prescription medication containers which were not labeled with a resident's full name: R105: One Calcitonin Salmon Nasal Spray One tube of GoodSense Diclofenac Sodium Topical Gel 1% R106: One bottle of Fluticasone Propionate Nasal Spray R107: One bottle of Fluticasone Propionate Nasal Spray R108: One tube of GoodSense Diclofenac Sodium Topical Gel 1% One tube of Diclofenac Sodium Topical Gel 1% R110: One tube of Diclofenac Sodium Topical Gel 1% The operator failed to ensure each prescription medication container had a label provided by a dispensing pharmacist affixed to the container.	S3213		