

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N087073	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/01/2016
NAME OF PROVIDER OR SUPPLIER GLEN CARR HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 1433 N HAMILTON DRIVE DERBY, KS 67037		
(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 abbreviated (complaint) survey at the above named facility on 10-26-16, 10-27-16, 10-31-16, and 11-1-16.	S 000		
S3080 SS=D	26-41-201 (a) (b) Functional Capacity Screen on Admission a) On or before each individual 's admission to an assisted living facility or residential health care facility, a licensed nurse, a licensed social worker, or the administrator or operator shall conduct a screening to determine the individual 's functional capacity and shall record all findings on a screening form specified by the department. The administrator or operator may integrate the department 's screening form into a form developed by the facility, which shall include each element and definition specified by the department. (b) A licensed nurse shall assess any resident whose functional capacity screening indicates the need for health care services. This REQUIREMENT is not met as evidenced by: KAR 26-41-201(a) The facility identified a census of 46 residents. The sample included 2 focus review residents. Based on record review and interview for 1 (#1) of 2 residents focus reviewed, the administrator failed to ensure a Functional Capacity Sreen (FCS) completed on or before admission to facility. Findings included:	S3080		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S3080	Continued From page 1 - Record review for resident #1 revealed an admit date of 7-7-16 with diagnosis of dementia with behaviors, mood disorder, and depression. The record lacked a FCS. Interview on 10-27-16 at 3:25 p.m. with the administrator stated and confirmed the record lacked a FCS. For resident #1, the administrator failed to ensure a FCS completed on or before admission to facility.	S3080		
S3165 SS=D	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 identified a census of 46 residents. The sample included 2 focus review residents. Based on record review and interview for 1 (#2) of 2 focus reviewed residents, the administrator failed to ensure the Negotiated Service Agreement (NSA) contained a description of Health Care Services (HCS) to be provided for falls. Findings included: - Record review for resident #2 revealed an	S3165		

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S3165	Continued From page 2 admit date of 9-24-16 with diagnosis of alzheimer's, kidney failure, renal/pelvis cancer, dementia, and osteoarthritis. The functional capacity screen dated 10-8-16 recorded resident required physical assistance with bathing, dressing, toileting, transfer, bladder incontinence, unable to assist with walking/mobility, impaired decision making, short term memory loss, long term memory loss, memory recall and experienced falls/unsteadiness. The NSA/HCS dated 10-8-16 recorded resident required one to two person assist for transfer, one person assist for bathing, dressing, incontinent care and resident had fallen in last 90 days. The hospice home health note dated 10-20-16 recorded resident was sitting in wheelchair in living area. Hospice nurse just completed visit and when went to pick up equipment to leave observed resident had scooted to end of chair and fell onto floor. The typed note mailed to the department by licensed staff B dated 10-15-16 recorded on 10-14-16 at approximately 7:30 p.m. staff called to report that resident had slid out of wheelchair and landed on coccyx when sitting with hospice nurse, this writer spoke with hospice nurse and reported that assessment was done on resident with no injuries noted. As an intervention this writer asked hopice to look into a wheelchair with reclining back so resident would not be able to scoot our to edge and fall out. The record lacked documentation of fall in nurses notes. The NSA/HCS lacked interventions for	S3165		

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S3165	Continued From page 3 fall. Interview on 10-27-16 at 4:30 p.m. with licensed staff B stated he/she had not documented interventions in resident's record but hospice did bring out a reclining wheelchair. For resident #2, the administrator failed to ensure the NSA contained a description of HCS to be provided for falls.	S3165		
S3299 SS=F	26-41-206 (e) (1) Facility Food Storage (e) Food storage. Facility staff shall store all food under safe and sanitary conditions. (1) Containers of poisonous compounds and cleaning supplies shall not be stored in the areas used for food storage, preparation, or serving. This REQUIREMENT is not met as evidenced by: KAR 26-42-206(e) The facility identified a census of 46 residents. The sample included 2 residents. Based on observations and interviews for all residents, the facility staff failed to store all food under safe and sanitary conditions. Findings included: - On 10-26-16 at 11:35 a.m. observed food temperature logs in house 3 that ranged from 170 degrees Fahrenheit (F) to 190 degree F. Observed barbecue pulled pork, baked potatoes, mixed vegetables. Observed bananas, oranges,	S3299		

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S3299	Continued From page 4 grapefruit, and grapes on a large service tray. On 10-26-16 at 12:10 p.m. at house 4 observed life enrichment staff C and certified staff D take food out of food warmer brought from house 3 and set containers of barbecue pulled pork, baked potatoes, and mixed vegetables, on kitchen counter. The lids were removed from containers. Life enrichment staff C prepared plates to serve food to residents without getting a food temperature. When asked about the food temperature he/she stated they did not take food temperatures or have a thermometer to take food temperatures. Certified staff D stated he/she did not check food temperatures and did not have a thermometer to check the food. Administrator called chef to come over to house 4 from house 3. The chef stated he/she checked the food temperatures at house 3 before the meal carts are taken to houses 1, 2, and 4. The chef checked the food temperature of the barbecue pulled pork. The temperature was 120 degrees F. The chef then started warming the food up in the microwave and stated the staff should heat up food in the microwave before serving the food. Interview with life enrichment C and certified staff D stated they have always served the food out of the warming cart and would not know how hot or cold the food was because they did not have thermometers. Interview at 12:25 p.m. at house 1 with life enrichment E, C and certified staff F stated they did not have a thermometer to check food temperatures. Interview at 12:45 p.m. with administrator stated and confirmed house 2 and house 4 did not have thermometers to check food temperatures. On 10-26-16 at 12:25 p.m. tour of kitchen in house 1 with life enrichment staff E revealed a refrigerator that contained a red substance that	S3299		

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S3299	Continued From page 5 dripped down the food bins to bottom of refrigerator. The following items were not sealed, dated, or labeled in the refrigerator: a large bag of sausage, one half onion that was black around edges, uncooked chicken, and raw hamburger. The food storage room contained a box of graham cracker crust in large plastic bag opened, a pie pan of graham cracker crust with a tool laying on top of it, a bag of flour, sugar, chicken gravy powder mix, box of quick oats, all items opened, not sealed, and lacked date opened. On the floor noted a package of jell-o mix with partial tear in package. The shelves in pantry contained a yellow, brown, and white powdery substance. On 10-26-16 at 12:45 p.m. tour of kitchen in house 2 with administrator and licensed staff B revealed a refrigerator that contained a large box of raw eggs sitting over raw foods. The raw eggs lacked a container to prevent spillage. Observed a large bag of cheese not sealed or date opened, a large container of a dark brown substance without a label or date, the plastic bins in the refrigerator had front broke off of them allowing spillage out of the bins. When refrigerator door opened a package of shredded lettuce fell out of bin onto floor. Noted a large plastic container of Thousand Island dressing with small amount orange/brown/black substance in bottom without a date opened. In the freezer noted 4 packages of frozen garlic bread in a clear opened bag without label or date, a gallon baggie of what looked like macaroni and cheese without label, sealed bag, or date, a large roast in pie pan frozen, not covered, dated, or labeled, and cookies covered in plastic wrap without label or date. The freezer also contained a large black plastic bag of frozen meat patties that was open and contained freezer burns. The pantry contained the following: an open package of	S3299		

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S3299	Continued From page 6 sugar, open bag of chips, open box of rice crispy cereal, open box of graham cracker crust with open bag, open box of cream of wheat, open package of flour, open box of candy sprinkles, one hard hamburger bun in an open package, plastic water pitcher with black beans, all lacked date opened, labels, or sealed packages. In pantry also noted a gallon plastic container of thick brown substance the chef identified as molasses. The top of gallon container of molasses was covered with foil and a rubber band, the container had brown substance dripping down that was sticky, and dated 2-26-14. The pantry shelves contained a brown, white, and orange substance. On 10-26-16 at 2:00 p.m. tour of kitchen pantry in house 3 with chef revealed a gallon container of maple syrup not dated. The pantry also contained open packages of chicken gravy mix, flour, sugar, box of shredded wheat cereal, corn flakes cereal, box of brown sugar, package of Doritos/chips, box of instant potatoes, and white gravy mix. The above lacked a seal, date, or date opened. The freezer contained a large open black trash bag of frozen chicken with freezer burn, large open clear bag of chicken fried steak (per chef) open with freezer burn, open plastic bag of frozen rolls, and a half of frozen carrot cake. The frozen items lacked a label, and date opened. The chef stated he/she opened the packages and divided them up between the houses and put them in a bag in each freezer. The chef stated and confirmed the items lacked a label, date opened, and not sealed. For all residents, the facility staff failed to store all food under safe and sanitary conditions.	S3299		