

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N087077	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/24/2016
NAME OF PROVIDER OR SUPPLIER LARKSFIELD PLACE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 2727 N ROCK RD WICHITA, KS 67226		
(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 a Complaint investigation at the above named Assisted Living Facility in Wichita, Kansas on 3/23/16 and 3/24/16.	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 26-41-204(a) The census equalled 64 the sample included three Residents. Based on interviews and reviews of records, for one of three sampled with a history of behaviors, refusals of incontinent care, and falls (#2), the Administrator failed to ensure a licensed nurse provided or coordinated the provision of health care services to address repetitive falls, repetitive refusals of incontinent care, and behaviors, of a cognitively impaired Resident. Findings included: - Review of record revealed #2 admitted to facility 7/05/14 with diagnoses of Dementia, Allergies, Joint pain, Back pain, Osteoarthritis, and Depression.	S3155		

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

TITLE

(X6) DATE

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S3155	Continued From page 1 The current functional capacity screen (FCS) of 6/29/15 assessed #2 in need of supervision with bathing, dressing, toileting, and eating; independent with transfers and mobility; unable to perform medication and treatment management; occasional bladder incontinence (2); cognitive impairment with memory recall and decision making; with some communication impairment (usually understandable); and with falls/unsteadiness. The current NSA/HSP (negotiated service agreement/health service plan) of 12/05/15 documented: staff to provide bathing assistance two times weekly; toileting and incontinent assistance every two hours as needed; mobility assistance with walker; assistance/cuing with grooming/dressing; reminders for meals and activities; assistance with shaving as needed; encourage to sleep in bed; encouragement to participate in activities; activities per cognitive level, redirection at times; enjoys 1:1 time; management of behavioral symptoms. A hand written note added to the NSA dated 12/28/15 documented "Fall. Staff to provide 1;1 during episodes of agitation. Redirect. Offer toileting assist. Encourage activities. The NSA/HSP's dated 6/29/15 and 12/05/15 documented no further changes in services. Nurse's Notes and Interdisciplinary Progress Notes: 11/28/15 - 0549 - Resident on the floor... confusion... states attempting to get out of recliner... non-injury fall...	S3155		

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S3155	Continued From page 2 12/20/15 - 1026 - staff reported increased behaviors on 3rd shift... arguing and ripped up papers and books... broke statue... everything on walls on floor By review, the current NSA/HSP lacked revision interventions to address behaviors. 12/28/15 - 1456 - continue fall follow-up... able to walk... able to move bilateral extremities... 12/29/15 - 1500 - fall follow up charting for 12/28/15... alert, able to move extremities... (no documentation of this fall in previous notes) 01/29/16 - 0420 - staff report of Resident fall at 0345... found sitting in living room in front of recliner in apartment... highly agitated, unable/unwilling to state what happened... attempt to hit staff... By review, the current NSA/HSP lacked revision interventions to address falls. 01/20/16 - 1000 - continues to refuse vitals and neuro checks... 02/09/16 - 1125 - new order to increase Zoloft to 100mg (milligrams) per physician, requested by behavior team... 02/12/16 - 1808 - increased behaviors, see behavior sheet... DPOA (durable power of attorney) consented to consult with psyche consult... By review, the current NSA/HSP lacked revision interventions to address behaviors and falls. 02/17/16 - 0330 - Resident had fallen... on floor of apartment... unable to recall what happened...	S3155		

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S3155	Continued From page 3 able to move extremities... no sings of injury... 02/17/16 - 1534 - staff reported open area on bottom... physician notified... Calmo applied... 02/20/16 - 1120 - Ativan 0.25mg daily as needed for agitation... Resident was swinging towel around after putting in toilet with feces and chasing staff... 3/04/16 - 1330 - staff report Resident being combative and refusing care... incontinent of bowel and bladder... 3/11/16 - no time - heard by staff yelling... found on floor... 3/21/16 - 1110 - new order for Ativan 0.25mg for increased behaviors/agitation... attempted to complete skin assessment... Resident refused... determined bruising to left distal forearm related to recent fall, no suspicious bruising noted... By review, the current NSA/HSP lacked revision interventions to address behaviors and falls. By interview on 3/23/16 at 3:33pm, Licensed Nurse #C stated rather than changes on the NSA/HSP, we use "Care Cards"... these are reminders of things to look out for... By interview on 3/23/16 at 3:35pm, Memory Support Coordinator stated a lot of that is passed on in stand up meeting and 24 hour communication log... pass on to each other if agitated, etc... have had physical therapy... think #2 refused... since most falls are in his/her room, just do more frequent visual checks... to handle agitation one person approaches... if agitated we try someone else... if combative with toileting, that	S3155		

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S3155	Continued From page 4 is a Licensed Nurse #C question... it takes several staff when #2's like that... it will take several staff to get pants down and get brief on... By interview on 3/23/16 at 3:37pm, Licensed Nurse #C stated may take several people... if not successful we re-approach as team... therapeutic crisis intervention holds not used that I am aware of... those things are taught at orientation... I am not aware it's taken three staff... By interview on 3/23/16 at 4:17pm, Administrator stated we have behavior documentation not in the record... we meet as a committee each time someone falls and come up with new interventions... Administrator confirmed interventions not included in the NSA/HSP. The Administrator failed to ensure a licensed nurse provided or coordinated health care services for #2 to address repetitive falls, repetitive refusals of incontinent care, and behaviors, of a cognitively impaired Resident.	S3155		
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)(11)	S3261		

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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

LARKSFIELD PLACE ASSISTED LIVING

**2727 N ROCK RD
WICHITA, KS 67226**

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S3261	Continued From page 5 The census equalled 64 the sample included three Residents. Based on interviews and reviews of records, for one of three sampled with a history of behaviors, refusals of incontinent care, and falls (#2), the Administrator failed to ensure a licensed nurse provided or coordinated the provision of health care services to address repetitive falls, repetitive refusals of incontinent care, and behaviors, of a cognitively impaired Resident. Findings included: - Review of record revealed #2 admitted to facility 7/05/14 with diagnoses of Dementia, Allergies, Joint pain, Back pain, Osteoarthritis, and Depression. The current functional capacity screen (FCS) of 6/29/15 assessed #2 in need of supervision with bathing, dressing, toileting, and eating; independent with transfers and mobility; unable to perform medication and treatment management; occasional bladder incontinence (2); cognitive impairment with memory recall and decision making; with some communication impairment (usually understandable); and with falls/unsteadiness. The current NSA/HSP (negotiated service agreement/health service plan) of 12/05/15 documented: staff to provide assistance with these identified needs. Nurse's Notes and Interdisciplinary Progress Notes: 12/20/15 - 1026 - staff reported increased behaviors on 3rd shift... arguing and ripped up papers and books... broke statue... everything on	S3261		

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S3261	Continued From page 6 walls on floor 01/20/16 - 1000 - continues to refuse vitals and neuro checks... 02/09/16 - 1125 - new order to increase Zoloft to 100mg (milligrams) per physician, requested by behavior team... 02/12/16 - 1808 - increased behaviors, see behavior sheet... DPOA (durable power of attorney) consented to consult with psyche consult... 02/20/16 - 1120 - Ativan 0.25mg daily as needed for agitation... Resident was swinging towel around after putting in toilet with feces and chasing staff... By interview on 3/23/16 at 3:33pm, Licensed Nurse #C stated rather than changes on the NSA/HSP, we use "Care Cards"... these are reminders of things to look out for... (by review this log lacked specific interventions or changed interventions) By interview on 3/23/16 at 3:35pm, Memory Support Coordinator stated a lot of that is passed on in stand up meeting and 24 hour communication log... pass on to each other if agitated, etc... By interview on 3/23/16 at 4:17pm, Administrator stated we have behavior documentation not in the record... By review on 3/23/16, multiple pages of notes revealed ongoing, escalating, varied behaviors of verbal attacks, refusals of incontinent care, and assaults on staff. These incidents and	S3261		

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S3261	Continued From page 7 occurrences, that actions taken to resolve, and the results of those actions not in the Resident's medical record at time of review. On 3/23/16 at 4:55pm, Administrator stated we have this documentation... remains in a "soft chart" (behavior notebook on floor), but it does not become part of the medical record until the record is closed The Administrator failed to ensure #2's record contained documentation of all incidents, the date, time of occurrence, action taken, and results of the action.	S3261		