STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N089063	A. BUILDING: _____ B. WING _____	C 10/06/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ATRIA HEARTHSTONE EAST	3415 SW 6TH AVENUE TOPEKA, KS 66606

(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 survey for re-licensure with attached complaints conducted on 9/30/20, 10/1/20, 10/5/20 and 10/6/20 at the above named assisted living facility in Topeka, KS.	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 facility reported a census of 84 residents. The sample included 6 residents and 2 closed record reviews. Based on record review, observation and interview for 2 (#931, 935) sampled residents requiring health care services, the administrator failed to 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. Findings included:	S3155		

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

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S3155	Continued From page 1 - Record review for resident #931 recorded and admission date of 2/26/20 with diagnoses of vascular dementia with behavior disturbances, hyperlipidemia and hypertension. Functional Capacity Screen (FCS) dated 9/17/20 recorded resident was independent with eating. Had problems with short term memory, memory/recall and decision making. Resident communication is sometimes understandable and sometimes understands. Negotiated Service Agreement and Health Care Service Plan (NSA/HCSP) dated 9/17/20 recorded: staff will remind resident to attend meals and encourage independence in dining, remind to attend meals, open condiment containers etc. Resident notes (nurses notes) dated 7/31/20 at 8:49pm recorded (aide) reported resident was eating and just got up after eating her desert and drinking her water and when encouraged to eat resident got upset. Resident then ambulated to her apartment ...." Signed by licensed nurse #D. Resident notes dated 8/2/20 at 2:47pm recorded " ...resident has not eaten breakfast or lunch today. Denies when offered ...resident was leaning off bed and (aide) assisted back into bed. (aide) states that resident cursed at her and told her to get out." Signed by licensed nurse #D Physician's clinic report dated 12/5/19 recorded resident weight at 154 pounds. Fax dated 2/28/20. Physician's clinic report dated 9/13/20 recorded resident weight at 124 pounds 3.2 ounces.	S3155		

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S3155	Continued From page 2	S3155		

Resident estimated height: 5 foot 4 inches.

On 9/13/20: Resident weight loss of approximately 30 pounds in 9 months.

Resident notes dated 9/28/20 at 5:15pm recorded "(daughter) wanted to know what her mom's weight was and they hadn't been successful in obtaining it the day before ... . Weighed (resident) on the medical scales at 119.5 pounds.." signed by administrative certified staff #E.

On 9/28/20: Resident weight loss of another 5 pounds in 2 weeks for a total of approximately 34.5 pounds; a percentage weight loss of approximately 22% of resident's body mass.

Observation on 10/1/20 at 11:25am in memory care unit dining room: 7 female residents were in the dining room. Resident #931 was not in dining room, found in another resident's room, in bed, at 11:30 and was escorted to her bed by administrative certified staff #E after resident refused to eat. Resident was observed in her bed at 11:45, staff stated they would try to get her to eat after she slept.
Observation and interview with resident on 9/30/20 at 3:43 in resident's room. Resident holds a toy baby doll she plays with, does not answer appropriately to questions, some word-salad type speech noted.

HCSP lacked entries for interventions for communication problems and for eating behaviors that resulted in resident weight loss. Interview on 10/1/20 at 4:50pm with licensed nurse #C confirmed HCSP lacked interventions for resident communication problems and eating/behavior problems. She confirmed

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S3155	Continued From page 3	S3155		

resident does speak in a word-salad type speech at times.

- Record review for resident #935 recorded admission date of 1//30/20 with diagnoses of: frequent falls, left hip and right knee fractures, restless leg syndrome and neuropathy.

Functional Capacity Screen (FCS) dated 7/23/20 recorded resident was independent with toileting and transfers and usually continent for bladder function.

Negotiated Service Agreement and Health Care Service Plan (NSA/HCSP) dated 9/17/20 recorded: may need some assistance with pulling down her pants and pulling them back up, does not require assistance with transfers.

Observation and interview on 10/5/20 at 3:12pm with resident in her room, she confirmed she self-catheterizes up to 4 times a day and does ok with it. Observed a bed cane on resident's right hand side of her twin bed. She confirmed she used the bed cane and really liked it a lot.

HCSP lacked entries for resident self-catheterization and use of a bed cane for transfers.

Interview on 10/5/20 at 4:50pm with licensed nurse #C confirmed HCSP lacked entries for resident use of a bed cane and self-catheterizations. She stated an assessment for resident's ability to self-catheterize properly has not been completed.

For residents #931, #935 who required health care services, the administrator failed to ensure that a licensed nurse provides or coordinates the

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S3155	Continued From page 4 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.	S3155		
S3171 SS=G	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 facility reported a census of 84 residents. The sample included 6 residents and 2 closed review residents. Based on record review, observation and interviews for 1 (#931) sampled resident, the administrator failed to ensure qualified staff provided health care services in accordance with acceptable standards of practice. Findings included: - Record review for resident #931 recorded and admission date of 2/26/20 with diagnoses of Vascular dementia with behavior disturbances, hyperlipidemia and hypertension. Functional Capacity Screen (FCS) dated 6/19/20 recorded resident was independent with eating. Had problems with short term memory, memory/recall and decision making. Resident	S3171		

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S3171	Continued From page 5	S3171		

communication is sometimes understandable and sometimes understands.

Negotiated Service Agreement and Health Care Service Plan (NSA/HCSP) dated 6/19/20 recorded: staff will remind resident to attend meals and encourage independence in dining, remind to attend meals, open condiment containers etc.

FCS dated 9/17/20 recorded resident was independent with eating. Had problems with short term memory, memory/recall and decision making. Resident communication is sometimes understandable and sometimes understands.

NSA/HCSP dated 9/17/20 recorded: resident required assistance; "remind to attend meals, open condiment containers, etc."

Physician's clinic report dated 12/5/19 recorded resident weight at 154 pounds. Fax dated 2/28/20.

Physician's clinic report dated 9/13/20 recorded resident weight at 124 pounds 3.2 ounces. Resident estimated height: 5 foot 4 inches.

As of 9/13/20: Resident weight loss of approximately 30 pounds in 9 months per surveyor review.

Resident notes dated 9/28/20 at 5:15pm recorded "(daughter) wanted to know what her mom's weight was and they hadn't been successful in obtaining it the day before ... . Weighed (resident) on the medical scales at 119.5 pounds.." signed by administrative certified staff #E.

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S3171	Continued From page 6	S3171		

As of 9/28/20: Resident weight loss of another 5 pounds in 2 weeks for a total of approximately 34.5 pounds; a percentage weight loss of approximately 22% of resident's body mass as per surveyor review.

Resident notes (nurses notes) dated 7/31/20 at 8:49pm recorded (aide) reported resident was eating and just got up after eating her desert and drinking her water and when encouraged to eat resident got upset. Resident then ambulated to her apartment ...." Signed by licensed nurse #D.

Resident notes dated 8/2/20 at 2:47pm recorded " ...resident has not eaten breakfast or lunch today. Denies when offered ...resident was leaning off bed and (aide) assisted back into bed. (aide) states that resident cursed at her and told her to get out." Signed by licensed nurse #D

Nurse practitioner visit dated 9/28/20 recorded orders for recent weight loss: Nutritional supplement with less than 50% of meals. Noted by licensed nurse #D.

Meal attendance report for the life guidance unit (memory care unit) for 9/28/20 recorded resident refused dinner; 9/30/20 recorded resident refused lunch.

September 2020 medication/treatment administration record lacked entry for nutritional supplement with less than 50% of meals.

October 2020 medication/treatment administration record recorded resident received a nutritional supplement with less than 50% of meals, 12 times from 10/1/20 to 10/5/20.

Observation on 10/1/20 at 11:25am in memory

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S3171	Continued From page 7	S3171		

care unit dining room: 7 female residents were in the dining room, no staff present, (4 staff pass room meals in the hall) 1 resident taps fingers and does not eat, others feed selves, 1 resident gets up and leaves the table. At 11:30 staff member appears and directs a resident back to table and leaves the dining room. Resident #931 was not in dining room, found in another resident's room, in bed, at 11:30 and was escorted to her bed by administrative certified staff #E after resident refused to eat. Resident was observed in her bed at 11:45, staff stated they would try to get her to eat after she slept. At 11:58 am in memory care unit dining room observed only 2 residents remained eating, upon exam of the closed meal boxes left on the tables for the other 5 residents, with certified staff #F, she stated the residents were done eating; most boxes contained 75% of meal yet in the boxes with only 1 having eaten 50% of the meal.

Interview on 9/30/20 at 12:15pm with administrator #A, stated facility does not obtain weights on residents unless it is ordered by the physician.

Interview on 10/1/20 at 8:45am with administrative certified staff #E stated (when asked what interventions they have put in place for resident's weight loss), "We have been trying to get (nurse practitioner) to prescribe a protein shake, she has not yet." She reported they tried facility made shakes but confirmed lack of documentation of this intervention.

Interview on 10/1/20 at 8:45am with licensed nurse #B confirmed resident NSA/HCSP lacked interventions for resident weight loss and/or an eating plan for resident.

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S3171	Continued From page 8 Interview on 10/1/20 at 10:00am with administrator #A stated facility does not do dietary assessments on admission. Interview on 10/1/20 at 10:00am with licensed nurse #B stated a "resident discovery" is done on admission but does not ask about resident food likes/dislikes. Interview on 10/1/20 at 4:00pm with administrator stated a dietician does a quarterly report but does not do resident reviews, only reviews the menus. Facility policy: functional capability assessment/reassessment recorded: "The community will provide appropriate assistance when an observation reveals unmet needs, which might require a change in the existing level of service, or possible discharge or transfer to another type of care facility. When changes such as unusual weight gains or losses or deterioration of health conditions are observed, the resident services director or executive director shall document the changes and bring such changes to the attention of the resident's physician and the resident's responsible person, if any." For resident #931 the administrator failed to ensure qualified staff provided health care services in accordance with acceptable standards of practice.	S3171		