STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N103005	A. BUILDING: _____ B. WING _____	01/30/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MORNINGSTAR CARE HOMES OF NEODESHA	400 FIR STREET NEODESHA, KS 66757

(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 licensure resurvey for the above named assisted living facility conducted on 1/29/19 and 1/30/19.	S 000		
S3065 SS=E	26-41-200 (a) Resident Criteria (a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the development and implementation of written admission, transfer, and discharge policies that protect the rights of each resident, pursuant to K.A.R. 26-39-102. In addition, the administrator or operator shall ensure that any resident who has one or more of the following conditions is not admitted or retained unless the negotiated service agreement includes services sufficient to meet the needs of the resident: (1) Incontinence, if the resident cannot or will not participate in management of the problem; (2) immobility, if the resident is totally dependent on another person ' s assistance to exit the building; (3) any ongoing condition requiring two or more persons to physically assist the resident; (4) any ongoing, skilled nursing intervention needed 24 hours a day; or (5) any behavioral symptom that exceeds manageability. This REQUIREMENT is not met as evidenced by: KAR 26-41-200 (a)(2) The facility reported a census of 25 residents. The sample included 3 residents. Based on	S3065		

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

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S3065	Continued From page 1	S3065		

observation, interview and record review the administrator failed to ensure the negotiated service agreement for each resident, based on the functional capacity screening, service needs and preferences included a description of the services the resident would require to exit the building in an emergency for 2 of 3 sampled residents (#389 and #411).

Findings included:

- Record review for resident #389 revealed an admission date of 8/16/08 with diagnoses of osteoarthritis, muscle weakness, depression, cataracts and iron deficiency anemia.

The significant change functional capacity screening (FCS) dated 12/28/18 identified the resident with short and long-term memory deficit, memory recall deficit and impaired decision making. The FCS indicated the resident was unable to perform any activities of daily living (ADLs) specifically transfers and mobility.

The negotiated service agreement (NSA) dated 12/28/18 indicated staff would provide and assist the resident with all aspects of ADLs. The section for assisted ambulation/transfers indicated the resident was bedbound without a transport chair. He/she would remain in bed and not be transferred. The NSA lacked information on the service needs for this totally dependent resident for exiting the building in an emergency as required in the resident admission criteria.

Observation on 1/29/19 at 11:45 AM with outside provider direct care staff A revealed he/she assisted the resident with incontinent care and repositioning. The resident was able to roll side to side with slight assistance and use of the side

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S3065	Continued From page 2	S3065		

rails. He/she was able to move all extremities.

Interview on 1/29/19 at 11:45 AM with the resident revealed he/she had been in the bed for a long time since he/she hurt his/her leg.

Interview on 1/29/19 at 12:25 PM with certified nursing assistant (CNA) B revealed the resident was totally dependent on staff for all ADLs. He/she did not get out of bed but if he/she had to get up they would use a lift and 2 staff.

Interview on 1/29/19 at 3:30 PM with licensed nurse C confirmed the NSA lacked information of the resident's service needs regarding exiting the building in the event of an emergency.

The administrator failed to ensure the negotiated service agreement for each resident, based on the functional capacity screening, service needs and preferences included a description of the services this resident needed to exit the building in an emergency.

- Record review for resident #411 revealed an admission dated of 6/02/08 with diagnoses of Alzheimer's disease.

The annual functional capacity screen (FCS) date 8/22/18 identified the resident with short and long-term memory deficit, memory recall deficit and impaired decision making. The FCS indicated the resident was unable to perform any activities of daily living (ADLs) specifically transfers and mobility. He/she used a wheelchair and was a fall risk.

The negotiated service agreement (NSA) dated 8/22/18 indicated staff would provide and assist the resident with all aspects of ADLs. The section

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S3065	Continued From page 3 for assisted ambulation/transfers indicated 2 staff would assist the resident to transfers into the wheelchair or to/from the recliner on days when he/she was able. An amended NSA dated 9/1/18 indicated facility staff would assist the resident to reposition every 2 hours and hospice provided an air mattress overlay. The record had no other amendments. The NSA lacked information on the service needs of this totally dependent resident for exiting the building in an emergency as required in the resident admission criteria. Observation on 1/29/19 at 12:28 PM revealed certified nursing assistant (CNA) B and D assisted the resident with incontinent care and repositioning. The resident was unable to perform or assist with any of the tasks. He/she kept his/her arms and legs drawn up close to his/her body. Interview with CNA B on 1/29/19 at 12:25 PM revealed the resident was totally dependent on staff for all ADLs and did not get out of bed anymore. Interview on 1/29/19 at 3:30 PM with licensed nurse C confirmed the NSA lacked information of the resident's service needs regarding exiting the building in the event of an emergency. The administrator failed to ensure the negotiated service agreement for each resident, based on the functional capacity screening, service needs and preferences included a description of the services this resident needed to exit the building in an emergency.	S3065		
S3290 SS=D	26-41-206 (a) (b) Dietary Services	S3290		

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S3290	Continued From page 4 (a) Provision of dietary services. The administrator or operator of each assisted living facility or residential health care facility shall ensure the provision or coordination of dietary services to residents as identified in each resident ' s negotiated service agreement. If the administrator or operator of the facility establishes a contract with another entity to provide or coordinate the provision of dietary services to the residents, the administrator or operator shall ensure that entity ' s compliance with these regulations. (b) Staff. The supervisory responsibility for dietetic services shall be assigned to one employee. (1) A dietetic services supervisor or licensed dietician shall provide scheduled on-site supervision in each facility with 11 or more residents. (2) If a resident ' s negotiated service agreement includes the provision of a therapeutic diet, mechanically altered diet, or thickened consistency of liquids, a medical care provider ' s order shall be on file in the resident ' s clinical record, and the diet or liquids, or both, shall be prepared according to instructions from a medical care provider or licensed dietitian. This REQUIREMENT is not met as evidenced by: KAR 26-41-206 (a) (2) The facility reported a census of 25 residents. The sample included 3 residents. Based on observation, interview and record review the administrator failed to ensure staff provided a mechanically altered diet for 1 of 3 sampled residents (#389) in accordance with the	S3290		

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S3290	Continued From page 5	S3290		

negotiated service agreement, a medical care provider's order and prepared according to instructions from a medical care provider or licensed dietitian.

Findings included:

- Record review for resident #389 revealed an admission date of 8/16/08 with diagnoses of osteoarthritis, muscle weakness, depression, cataracts and iron deficiency anemia.

The significant change functional capacity screening (FCS) dated 12/28/18 identified the resident with short and long-term memory deficit, memory recall deficit and impaired decision making. The FCS indicated the resident was unable to perform any activities of daily living (ADLs) which included eating.

The negotiated service agreement (NSA) dated 12/28/18 indicated staff would provide and assist the resident with all aspects of ADLs. The NSA listed the facility would provide 3 meals a day of a regular diet and 3 snacks a day offered. Staff would assist the resident with meals and the resident can assist at time with encouragement. On 1/11/19 licensed nurse C performed an amended NSA for a diet change to mechanical soft.

The plan of care dated 12/28/18 indicated staff would assist the resident with meals, the resident was bed bound. A revision on 1/11/19 included the resident had increased difficulty chewing/swallowing certain foods, specifically meat. His/her diet was downgraded to a mechanical soft diet and directed staff to refer to the kitchen for foods the resident needed to avoid. Staff to ensure resident is sitting up at a

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S3290	Continued From page 6 90-degree angle when eating. Review of the physician's orders revealed an order on 1/11/19 changing the resident's diet to mechanical soft. The record lacked instructions for how staff should prepare foods for the resident and which foods the resident should avoid. On 1/29/19 when asked about the resident's diet preparation dietary staff provided a 5-page document from UW Health - Health facts for you, about a mechanical soft diet with the resident's name written on it. These instructions were not signed by a medical care provider or licensed dietician as appropriate for this resident's needs. Observation on 1/29/19 at 12:00 PM revealed certified nursing assistant (CNA) D served a meal tray to the resident in his/her room. The resident was positioned in bed on his/her back with the head of bed elevated to about 90 degrees. The meal consisted of a Salisbury steak cut into small pieces and served with gravy, noodles (did not appear to have a sauce), cottage cheese and chocolate cake. While eating the meat the resident began to choke and CNA D responded timely to assist the resident with removal of his/her dentures, reassurance to stay calm and cough. The resident was able to clear his/her throat, take drink and resume eating the meal. Interview on 1/29/19 at 3:30 PM with licensed nurse C revealed he/she obtained the instruction sheets from the dietary manager at another facility and not from the medical care provider or a licensed dietician. The administrator failed to ensure staff provided a mechanically altered diet for this resident in	S3290		

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S3290	Continued From page 7 accordance with the negotiated service agreement, a medical care provider's order and prepared according to instructions from a medical care provider or licensed dietitian.	S3290		