STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087100	A. BUILDING: _____ B. WING _____	05/11/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COMFORT CARE HOMES INC #147	147 S RIDGEWOOD DR WICHITA, KS 67218

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S 000	INITIAL COMMENTS The following citations represent the findings of a resurvey of the above home plus facility on 5/7/15 and 5/11/15.	S 000		
S5105 SS=E	26-42-202 (a) Negotiated Service Agreement a) The administrator or operator of each home plus 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 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: KAR 26-42-202(a)(1) The facility reported a census of 5 residents. The sample included 3 residents. Based on record review and interview for 2 (#300 and #100), operator failed to ensure the development of a written negotiated service agreement for each resident based on the resident's functional capacity screen with a description of services each resident would receive. Findings included:	S5105		

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

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S5105	Continued From page 1 - Record review for resident #300 revealed an admission date of 8/7/14 and diagnoses of senile dementia, atrial fibrillation, and pressure ulcer left heel. The functional capacity screen dated 1/6/15 indicated the resident required physical assistance with bathing, dressing, toileting, transferring, and mobility; was unable to perform management of medications and treatments; experienced impaired short-term and long-term memory, decision making, and memory recall; and was at risk for falls. The negotiated service agreement and health care service plan dated 1/6/15 lacked a description of services related to the resident's risk for falls. Documentation by licensed nurses revealed the resident experienced falls as follows: 11/4/14 at 5:40 p.m. heard resident fall in living room. Was up without walker and fell. Small bump to back of head. 11/18/14 resident fell in bathroom. 11/20/14 received call from caregiver that resident's alarm sounded but did not get to resident in time to prevent fall. 1/25/15 resident fell while caregiver assisting another resident. 1/30/15 resident got up from wheelchair and fell. 2/16/15 resident's alarm sounded and caregiver found resident on floor at foot of bed.	S5105		

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S5105	Continued From page 2 3/14/15 Caregiver called and reported to nurse that during rounds found resident sitting on floor beside bed. During an interview at 2:00 p.m. on 5/7/15, licensed nurse #A stated due to resident's risk for falls resident had a bed and chair alarm to alert staff when resident getting up without assistance. Licensed nurse #A confirmed the resident was at risk for falls. Licensed nurse #A confirmed the resident's negotiated service agreement lacked a description of services related to risk for falls. The operator failed to ensure the development of a written negotiated service agreement for resident #300 based on the resident's functional capacity screen with a description of services the resident would receive. - Record review for resident #100 revealed an admission date of 12/31/14 and diagnoses of dementia, diabetes mellitus, degenerative joint disease, and hypertension. The functional capacity screen dated 12/31/14 indicated the resident required physical assistance with bathing; supervision with dressing, toileting, transferring, and mobility; unable to perform management of medications and treatments; experienced impaired short-term and long-term memory, decision making, and memory recall; and was at risk for falls. The negotiated service agreement and health care service plan dated 12/31/14 lacked a description of services related to the resident's risk for falls. Documentation by licensed nurses revealed the	S5105		

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S5105	Continued From page 3 resident experienced falls as follows: 1/12/15 caregiver was assisting another resident in the bathroom. Caregiver heard resident (#100) fall in the living room. 1/24/15 Caregiver called to report resident fell in bedroom 1/25/15 took bed alarm, foam noodle for outer edge of bed, and floor mat beside bed to be used for (resident's) safety at bedtime. At 2:10 p.m. on 5/7/15, licensed nurse #A confirmed resident was at risk for falls. Licensed nurse #A confirmed the resident's negotiated service agreement lacked a description of services related to risk for falls. The operator failed to ensure the development of a written negotiated service agreement for resident #100 based on the resident's functional capacity screen with a description of services the resident would receive.	S5105		
S5155 SS=D	26-42-204 (a) Health Care Services (a) The administrator or operator in each home plus 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.	S5155		

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S5155	Continued From page 4 This REQUIREMENT is not met as evidenced by: KAR 26-42-204(a) The facility reported a census of 5 residents. The sample included 3 residents. Based on record review and interview for 1 (#300) of 3 residents sampled, the operator failed to ensure the licensed nurse provided or coordinated necessary health care services that met the need of the resident. Findings included: - Record review for resident #300 revealed an admission date of 8/7/14 and diagnoses of senile dementia, atrial fibrillation, and pressure ulcer left heel. The functional capacity screen dated 1/6/15 indicated the resident required physical assistance with bathing, dressing, toileting, transferring, and mobility; supervision with eating; was unable to perform management of medications and treatments; experienced impaired short-term and long-term memory, decision making, and memory recall; and was at risk for falls. The negotiated service agreement and health care service plan dated 1/6/15 documented the health care service of management of medications as ordered by medical care provider and food services of 3 meals per day and snacks between meals with liquid nutritional supplement if resident ate less than 50% of meal. The record contained a medical care provider's written order dated 1/16/15 for fluid restriction of 2 liters (L) per day. The medication administration	S5155		

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S5155	Continued From page 5 record for 5/1/15 through 5/31/15 contained an entry of "2L fluid restriction daily." The medication administration record lacked documentation of the total oral fluid intake each day consumed by the resident. At 2:00 p.m. on 5/7/15, licensed nurse #A confirmed resident was on a 2L fluid restriction per day. Licensed nurse #A stated certified employees gave resident fluids to drink only at meals and with medication administration. Licensed nurse #A confirmed certified employees did not measure, monitor, and document resident's total fluid intake for each 8 hour shift in order to determine resident stayed within the 2L fluid restriction per day. The operator failed to ensure the licensed nurse provided or coordinated necessary health care services that met the need of resident #300.	S5155		
S5335 SS=F	28-39-437 Construction (a) Each home-plus facility shall be designed, constructed, equipped, and maintained to protect the health and safety of residents, personnel, and the public. (b) All new construction, renovation, remodeling, and changes in building use in existing buildings shall comply with building and fire codes, ordinances, and regulations enforced by city, county, and state jurisdictions, including the state fire marshal. This REQUIREMENT is not met as evidenced by: KAR 28-39-437(a) The facility reported a census of 5 residents. The	S5335		

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S5335	Continued From page 6 sample included 3 residents. Based on observation, record review, and interview for all residents living in the facility, the operator failed to maintain a safe environment for cognitively impaired residents. Findings included: - During tour of the facility at 9:07 a.m. on 5/7/15, observed a gallon bottle of bleach in the cabinet under the sink and a plastic medication cup containing a light pink thick substance in the cabinet above the sink in the bathroom for residents #100 and #200. At 9:15 a.m. on 5/7/15, observed a 1 quart spray bottle of 409 all-purpose cleaner in the top right drawer of a cabinet in the hall bathroom. Resident #500 had just walked out of this bathroom. At 9:22 a.m. on 5/7/15, observed a can of Comet powder deodorizing cleaner in the cabinet under the sink in the bathroom off the kitchen. Review of the resident roster revealed all 5 residents experienced impaired cognition and residents #500 and #200 were independent with toileting. During time in the facility from 9:00 a.m. to 4:45 p.m. on 5/7/15, observed residents #500 and #200 ambulate independently in the facility. Informed licensed nurse #A of the unlocked chemicals when observed. Licensed nurse #A instructed the certified employee to remove the chemicals from the bathrooms. The operator failed to maintain a safe environment for cognitively impaired residents.	S5335		

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S5380 SS=F	28-39-437 Plumbing and Piping Systems (i) Plumbing and piping systems. (1) Backflow prevention devices or vacuum breakers shall be installed on fixtures to which hoses or tubing can be attached. (2) Water distribution systems shall be arranged to provide hot water at hot water outlets at all times. The temperature of hot water shall range between 98° F and 120° F at showers, tubs, and lavatories accessible to residents. This REQUIREMENT is not met as evidenced by: KAR 26-42-437(i)(2) The facility reported a census of 5 residents. The sample included 3 residents. Based on observation, interview, and record review for all residents, the operator failed to ensure a hot water temperature range between 98° Fahrenheit (F) and 120° F at showers, tubs, and sinks accessible to residents. Findings included: - At 9:07 a.m. on 5/7/15 began taking hot water temperatures from sinks and obtained the following temperature readings: 129.5° F from the bathroom sink in room of residents #100 and #200. A walk-in shower was located in this bathroom. 136.7° F from the hall bathroom sink. This bathroom contained a tub with a shower. Resident #500 had just walked out of this bathroom.	S5380		

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S5380	Continued From page 8 138.9° F from the kitchen sink accessible to residents. 139.8° F from the sink in the bathroom off the kitchen accessible to residents. At 9:15 a.m. on 5/7/15, informed licensed nurse #A of the hot water temperature reading from the sink in the bathroom in the room of residents #100 and #200. At 9:20 a.m. on 5/7/15, informed licensed nurse #B of the hot water temperature readings. Licensed nurse #B stated he/she was contacting the maintenance director. At 9:30 a.m. on 5/7/15, reviewed the hot water temperature logs with licensed nurse #B who stated the certified employee on duty was to measure the hot water temperature (from 2 outlets) every morning and report any temperature out of range to the maintenance director. Review of the April 2015 and May 2015 hot water temperature logs revealed hot water temperatures above 120° F with the employee signing his/her name in the column labeled "If readings are out of normal range who did you report to:". Review of the April 2015 log revealed hot water temperature readings above 120° F on the following dates: 4/1/15 resident bathroom 124.2 ° F 4/6/15 kitchen 127 ° F, resident bathroom126° F 4/7/15 kitchen 126° F 4/8/15 kitchen 130 ° F	S5380		

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S5380	Continued From page 9 4/12/15 kitchen 126.7 ° F 4/14/15 kitchen 124° F 4/15/15 kitchen 135° F 4/16/15 kitchen 126° F 4/17/15 kitchen 135° F 4/19/15 resident bathrooms at 131° F and 122° F 4/20/15 kitchen 128° F, resident bathroom 124° F 4/21/15 resident bathrooms at 132° F and 122° F 4/22/15 kitchen 127.4° F 4/23/15 bathroom off kitchen 124.2° F 4/25/15 kitchen 132° F 4/26/15 resident bathroom 124° F, kitchen 122° F 4/28/15 kitchen 127° F 4/29/15 kitchen 133° F, resident bathroom 124° F 4/30/15 resident bathrooms 131° F and 124.2° F Certified employees did not record hot water temperature readings on April 4, 5, 9, 10, 11, 18, 24, and 27, 2015. Review of the May 2015 log revealed hot water temperature readings on May 1, 4, and 5 with all readings above 120° F as follows: 5/1/15 kitchen 130° F, resident bathroom 124° F	S5380		

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S5380	Continued From page 10 5/4/15 kitchen 126° F, resident bathroom 124° F 5/5/15 kitchen 127.2° F, resident bathroom 132° F The log lacked documentation of hot water temperature readings on May 2, 3, 6, and 7 2015. The maintenance director arrived at the facility at 9:35 a.m. on 5/7/15 and went into the locked laundry room that housed one hot water tank. Maintenance director stated the hot water tank thermostat had been set on "high." Maintenance director lowered the thermostat and ran hot water at the kitchen sink in order to lower hot water temperature. At 12:30 p.m. on 5/7/15, obtained a hot water temperature of 105.4° F from the kitchen sink and 102.3 ° F from the sink in residents #100 and #200's bathroom. During time in the facility from 9:00 a.m. until 4:45 p.m. on 5/7/15 observed residents #200 and #500 ambulate independently throughout the facility. Review of the resident roster revealed all 5 residents experienced impaired cognition and required physical assistance with bathing. The resident roster indicated residents #200 and #500 were independent with toileting. At 4:30 p.m. on 5/7/15, licensed nurse #A confirmed no action taken when hot water temperatures exceeded 120° F. For all residents living in the facility, the operator failed to ensure a hot water temperature range between 98° F and 120° F at showers, tubs, and sinks accessible to residents.	S5380		

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