STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B089084	A. BUILDING: _____ B. WING _____	10/12/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PRAIRIE WIND SENIOR LIVING INC	5227 SE 77TH STREET BERRYTON, KS 66409

(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 facility conducted on 10/11/22 and 10/12/22.	S 000		
S 140 SS=F	26-39-103 (i) Resident Right Privacy and Confidentiality (i) Privacy and confidentiality. The administrator or operator shall ensure that each resident is afforded the right to personal privacy and confidentiality of personal and clinical records. (1) The administrator or operator shall ensure that each resident is provided privacy during medical and nursing treatment, written and telephone communications, personal care, visits, and meetings of family and resident groups. (2) The administrator or operator shall ensure that the personal and clinical records of the resident are maintained in a confidential manner. (3) The administrator or operator shall ensure that a release signed by the resident or the resident's legal representative is obtained before records are released to anyone outside the adult care home, except in the case of transfer to another health care institution or as required by law. This STANDARD is not met as evidenced by: K.A.R. 26-39-103 (i)(2) The facility reported a census of 4 residents. The sample included 4 residents (R's). Based on record review and interview the operator failed to ensure the resident's records were maintained in	S 140		

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

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S 140	Continued From page 1	S 140		

a confidential manner for R112, R114, R116 and R118.

Findings included:

- Record review on 10/11/22 for R112 revealed an admission date of 09/23/22 with a diagnosis of dementia.

Record review of R112 "Functional Capacity Screen" (FCS) identified the resident required physical assistance with bathing, dressing, toileting, transferring, and walking/mobility. He was occasionally incontinent of bladder, he had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision making. He was usually able to make himself understood and usually understood others. He was identified as a fall risk, had impaired vision, impaired hearing, and impaired decision making. He used a wheelchair mobility device and lacked the ability to manage his own medications.

Record review of R112 "Negotiated Service Agreement" (NSA) identified the following healthcare services to be provided by the facility: bathing assistance two to 3 times a week and assistance with toileting. He had a listed hospice provider.

Record review of R112 "Healthcare Service Plan" (HSP) instructed staff to assist with showers and any other bathing needs, he had a home health aide from hospice that would visit 2 times a week to offer additional showers. Staff were to assist with dressing and transferring to the toilet. Staff to assist with transferring and use a gait belt

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S 140	Continued From page 2	S 140		

while in his room. He used a wheelchair for mobility outside of his room.

The resident record lacked documentation of all incidents, symptoms and other indications of illness or injury.

Observation on 10/12/22 revealed documentation of all incidents, symptoms and other indications of illness or injury included in the chart on the facility form titled "Nursing Progress Notes".

Interview with operator C on 10/17/22 revealed the document was downstairs in a file in her apartment.

- Record review on 10/11/22 for R114 revealed an admission date of 07/12/22 with diagnoses of anemia, anxiety, dementia, essential primary hypertension, and cerebral vascular accident.

Record review of R114 FCS identified the resident required physical assistance with bathing, dressing toileting, transferring, walking and mobility. She was frequently incontinent, had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision making. She usually made herself understood and usually understood others. She was marked as a fall risk and impaired decision making. She lacked the ability to manage her own medications and used a wheelchair mobility device.

Record review of R114 revised NSA identified the following healthcare services provided by the

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S 140	Continued From page 3	S 140		

facility: shower/bath assistance, toileting assistance, assistance with mobility and transferring. The NSA identified R114 had hospice services.
Record review of R114 HSP instructed staff to assist with showers and sponge baths. She had a home health aide that would help with additional showers one time a week. Staff were instructed to assist with clothing choices and provide hygiene care after toileting.

The resident record lacked documentation of all incidents, symptoms and other indications of illness or injury.

Observation on 10/12/22 revealed documentation of all incidents, symptoms and other indications of illness or injury included in the chart on the facility form titled "Nursing Progress Notes".

Interview with Operator C on 10/17/22 revealed the document was downstairs in a file in her apartment.

- Record review on 10/11/22 for R116 revealed an admission date of 09/12/22 with a diagnosis of malignant neoplasm of traverse colon; secondary malignant neoplasm of lung and pleura.

Record review of R116 FCS identified resident required physical assistance with bathing, dressing, toileting, transferring and walking/mobility. She was occasionally incontinent, had intact cognition, was able to make herself understood and understood others.

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S 140	Continued From page 4 She required supervision with her medications and required a wheelchair mobility device. Record review of R116 NSA identified the following healthcare services provided by the facility: supervision with minimal assist for showers at R116 request, minimal assist with hygiene care after toileting, and supervision with minimal assist for mobility. The NSA identified the resident had hospice services. The resident record lacked documentation of all incidents, symptoms and other indications of illness or injury. Observation on 10/12/22 revealed documentation of all incidents, symptoms and other indications of illness or injury included in the chart on the facility form titled "Nursing Progress Notes". Interview with operator C on 10/17/22 revealed the document was downstairs in a file in her apartment. - Record review on 10/11/22 for R118 revealed an admission date of 03/17/2020 with diagnoses of dementia, glaucoma, and benign prostatic hyperplasia. Record review of R118 FCS identified he required supervision with bathing and dressing, and he was independent with toileting, transferring, walking/mobility, and eating. He was occasionally incontinent, and had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision	S 140		

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making. He was able to make himself understood and understood others. He was marked with impaired decision making, lacked the ability to manage his own medications, and used no mobility assistive device.

Record review of R118 NSA identified the following healthcare services provided by the facility; bathing assistance which included reminders and setting up of the bathing supplies.

The resident record lacked documentation of all incidents, symptoms and other indications of illness or injury.

Observation on 10/12/22 revealed documentation of all incidents, symptoms and other indications of illness or injury included in the chart on the facility form titled "Nursing Progress Notes".

Interview with operator C on 10/17/22 revealed the document was downstairs in a file in her apartment.

Interview with operator C on 10/17/22 revealed the operator takes the resident documents off site for review by the facility nurse and she uses her own apartment (which is the downstairs of the home plus) as an office because there is more room and less distraction.

The operator failed to ensure the resident's records were maintained in a confidential manner for R112, R114, R116 and R118 by failing to maintain the records in the licensed facility.

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S5250 SS=D	26-42-105 (f) (1 - 10) Resident Records Content (f) Each resident record shall contain at least the following: (1) The resident's name; (2) the dates of admission and discharge; (3) the admission agreement and any amendments; (4) the functional capacity screenings; (5) the health care service plan, if applicable; (6) the negotiated service agreement and any revisions; (7) the name, address, and telephone number of the physician and the dentist to be notified in an emergency; (8) the name, address, and telephone number of the legal representative or the individual of the resident's choice to be notified in the event of a significant change in condition; (9) the name, address, and telephone number of the case manager, if applicable; (10) records of medications, biologicals, and treatments administered and each medical care provider ' s order if the facility is managing the resident's medications and medical treatments; and This REQUIREMENT is not met as evidenced by: K.A.R. 26-42-105 (f) (10) The facility reported a census of 4 residents. The sample included 4 residents' (R's). Based on record review and interview, the operator failed to ensure the resident records included the signed providers orders for medical care regarding the management of the medications for	S5250		

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S5250	Continued From page 7 R112. Findings included: - Record review for R112 revealed an admission date of 09/23/22 with a diagnosis of dementia. Record review of R112 "Functional Capacity Screen" (FCS) dated 09/23/22 identified the resident required physical assistance with bathing, dressing, toileting, transferring, and walking/mobility. He was occasionally incontinent of bladder, he had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision making. He was usually able to make himself understood and usually understood others. He was identified as a fall risk, had impaired vision, impaired hearing, and impaired decision making. He used a wheelchair mobility device and lacked the ability to manage his own medications. Record review of R112 "Negotiated Service Agreement" (NSA) dated 09/23/22 identified the following healthcare services to be provided by the facility: bathing assistance two to 3 times a week and assistance with toileting. NSA listed a hospice provider. Record review of R112 "Healthcare Service Plan" (HSP) signed on 09/25/22 instructed staff to assist with showers and any other bathing needs, he had a home health aide from hospice that would visit 2 times a week to offer additional showers. Staff were to assist with dressing and transferring to the toilet. Staff to assist with transferring and use a gait belt while in his room. He used a wheelchair for mobility outside of his	S5250		

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S5250	Continued From page 8 room. Record review on 10/11/22 at approximately 03:00 PM of R112, revealed the record lacked signed provider orders. Record Review on 10/11/22 at 04:20 PM of R112's signed orders revealed the orders were not signed until 10/05/22 by the provider. The orders were faxed to the facility on 10/11/22 at 04:20 PM. Interview on 10/11/22 with operator C confirmed the resident record lacked the signed provider orders at approximately 03:00PM for R112 and she called and requested the orders be sent to the facility. She confirmed she received the signed orders at 04:20 PM on 10/11/22 for R112. The operator failed to ensure the resident records included the signed providers orders for medical care regarding the management of the medications for R112.	S5250		
S5310 SS=E	26-42-205 (e) (f) (g 1 - 3) Medication Orders, Ordering, Labeling (e) Medication orders. Only a licensed nurse or a licensed pharmacist may receive verbal orders for medication from a medical care provider. The licensed nurse shall ensure that all verbal orders are signed by the medical care provider within seven working days of receipt of the verbal order. (f) Standing orders. Only a licensed nurse shall make the decision for implementation of standing orders for specified medications and treatments	S5310		

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S5310	Continued From page 9 formulated and signed by the resident ' s medical care provider. Standing orders of medications shall not include orders for the administration of schedule II medications or psychopharmacological medications. This REQUIREMENT is not met as evidenced by: K.A.R. 26-42-205 (e) The facility reported a census of 4 residents. The sample included 4 residents (R's). Based on record review and interview the operator failed to ensure the licensed nurse obtained the physicians signature on verbal phone orders within seven working days of the receipt of the verbal order for R112 and R114. Findings included: - Record review on 10/11/22 for R112 revealed an admission date of 09/23/22 with a diagnosis of dementia. Record review of R112 "Functional Capacity Screen" (FCS) identified the resident required physical assistance with bathing, dressing, toileting, transferring, and walking/mobility. He was occasionally incontinent of bladder, he had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision making. He was usually able to make himself understood and usually understood others. He was identified as a fall risk, had impaired vision, impaired hearing, and impaired	S5310		

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S5310	Continued From page 10 decision making. He used a wheelchair mobility device and lacked the ability to manage his own medications. Record review of R112 "Negotiated Service Agreement" (NSA) identified the following healthcare services to be provided by the facility: bathing assistance two to 3 times a week and assistance with toileting. NSA listed a hospice provider. Record review of R112 "Healthcare Service Plan" (HSP) instructed staff to assist with showers and any other bathing needs, he had a home health aide from hospice that would visit 2 times a week to offer additional showers. Staff were to assist with dressing and transferring to the toilet. Staff to assist with transferring and use a gait belt while in his room. He used a wheelchair for mobility outside of his room. Record review of R112 facility phone order dated 09/19/22 revealed the following order: "ok to admit to hospice of family's choice. With the verbal order provided by "Advanced Practice Registered Nurse" (APRN) E. The phone order lacked the signature of the "Licensed Nurse" (LN) taking the verbal phone order at the time of the order, and the order further lacked signature of the provider giving the order within seven days of receipt of the order. Interview on 10/12/22 with operator C confirmed the phone order document lacked the required signatures of the LN receiving the phone order at the time the order was given, further lacked the signature of the provider giving the order within seven days of receipt of the order.	S5310		

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S5310	Continued From page 11	S5310		

- Record review on 10/11/22 for R114 revealed an admission date of 07/12/22 with diagnoses of anemia, anxiety, dementia, essential primary hypertension, and cerebral vascular accident.

Record review of R114 FCS identified the resident required physical assistance with bathing, dressing toileting, transferring, walking and mobility. She was frequently incontinent, had impaired short-term memory, impaired long-term memory, impaired memory recall, and impaired decision making. She usually made herself understood and usually understood others. She was marked as a fall risk and impaired decision making. She lacked the ability to manage her own medications and used a wheelchair mobility device.

Record review of R114 revised NSA identified the following healthcare services provided by the facility: shower/bath assistance, toileting assistance, assistance with mobility and transferring. The NSA identified R114 had hospice services.

Record review of R114 HSP instructed staff to assist with showers and sponge baths. She had a home health aide that would help with additional showers one time a week. Staff were instructed to assist with clothing choices and provide hygiene care after toileting.

Record review of R114 facility phone order documents dated 07/20/22 thru 09/19/22 revealed the following phone orders:

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S5310	Continued From page 12 07/20/22 Zoloft (antidepressant) 25 milligrams by mouth every morning for seven days, then increase to 50 milligrams every morning. Verbal order was provided by APRN E. The phone order lacked the signature of the "Licensed Nurse" (LN) taking the verbal phone order at the time of the order, and the order further lacked signature of the provider giving the order within seven days of receipt of the order. 08/10/22 Increase Zoloft to 100 milligrams by mouth every day. Start Depakote (seizures) 125 milligrams by mouth twice a day in the morning and evening. Verbal order was provided by APRN E. The phone order lacked the signature of the "Licensed Nurse" (LN) taking the verbal phone order at the time of the order, and the order further lacked signature of the provider giving the order within seven days of receipt of the order. 08/18/22 Zyrtec (allergies) 10 milligrams by mouth every day Omnicef (antibiotic) 3 (unreadable number) 0 milligrams by mouth twice daily for ten days. Verbal order was provided by APRN E. The phone order lacked the signature of the "Licensed Nurse" (LN) taking the verbal phone order at the time of the order, and the order further lacked signature of the provider giving the order within seven days of receipt of the order. 09/19/22 Ok to admit to hospice of family's choice. Verbal order provided by APRN E.	S5310		

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S5310	Continued From page 13 The phone order lacked the signature of the "Licensed Nurse" (LN) taking the verbal phone order at the time of the order, and the order further lacked signature of the provider giving the order within seven days of receipt of the order. Interview on 10/12/22 with operator C confirmed the phone order document lacked the required signatures of the LN receiving the phone order at the time the order was given, further lacked the signature of the provider giving the order within seven days of receipt of the order. The operator failed to ensure the licensed nurse obtained the physicians signature on verbal phone orders within seven working days of the receipt of the verbal order for R112 and R114.	S5310		
S5313 SS=D	26-42-205 (g) (3) Over the counter medication (g) (3) A licensed nurse or medication aide may accept over-the-counter medication only in its original, unbroken manufacturer ' s package. A licensed pharmacist or licensed nurse shall place the full name of the resident on the package. If the original manufacturer ' s package of an over-the-counter medication contains a medication in a container, bottle, or tube that can be removed from the original package, the licensed pharmacist or a licensed nurse shall place the full name of the resident on both the original manufacturer ' s medication package and the medication container. This REQUIREMENT is not met as evidenced by:	S5313		

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(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
S5313	Continued From page 14 K.A.R 26-42-205 (g)(3) The facility reported a census of 4 residents. The sample included 4 residents (R's). Based on Observation and interview the operator failed to ensure the licensed nurse or pharmacist labeled the "Over The Counter" (OTC) medications for R112 and R114. Findings included: - Observation on 10/11/22 at 02:10 PM during the facility tour revealed the following: "Certified Medication Aide" (CMA) D opened the locked medication closet. The medication closet was organized with baskets with the resident's name written on the basket. The following OTC's lacked the full name of the resident on the package: 1 opened bag of Equate honey lemon suppressant cough drops 1 bottle of Right Remedies all day allergy relief 10 milligram 2 bottles of Preser Vision (eyes) 1 bottle Tylenol extra strength (pain/fever) Lopermide hydrochloride 2milligram anti diarrheal Aspirin 81milligrams (pain/fever) Kroger Brand stool softener Interview with operator C and CMA D confirmed the OTC's did belong to R112 and R114 and the bottles/packages lacked the full names of R112 and R114. The operator failed to ensure the licensed nurse or pharmacist labeled the "Over The Counter"	S5313		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B089084	A. BUILDING: _____ B. WING _____	10/12/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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S5313	Continued From page 15 (OTC) medications with R112 and R114 full name.	S5313		