STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087215	A. BUILDING: _____ B. WING _____	10/20/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHRIST CARE HOME PLUS, LLC	7901 W JENNIE STREET WICHITA, KS 67212

(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 represent the findings of a resurvey for the above named home plus facility conducted on 10/19/22 and 10/20/22.	S 000		
S5080 SS=D	26-42-201 (a) (b) Functional Capacity Screen on Admission (a) On or before each individual ' s admission to a home plus, a licensed nurse, a licensed social worker, or the administrator or operator shall conduct a screening to determine the individual ' s functional capacity and shall record all findings on a screening form specified by the department. The administrator or operator may integrate the department ' s screening form into a form developed by the home, which shall include each element and definition specified by the department. (b) A licensed nurse shall assess any resident whose functional capacity screening indicates the need for health care services. This REQUIREMENT is not met as evidenced by: KAR 26-42-201(a) The facility reported a census of five residents with three residents included in the sample. Based on interview and record review the operator failed to conduct a "Functional Capacity Screen" (FCS) for Resident (R) 119 based on her needs and preferences on or before admission.	S5080		

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

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S5080	Continued From page 1 Findings included: - Record review for R119 revealed an admission date of 09/10/22 with the following diagnoses: dementia, Crohn's disease, and chronic obstructive pulmonary disorder (COPD). The undated "FCS" identified R119 required physical assistance with bathing, dressing, toileting, transfers, and walking/mobility; she was unable to perform management of medications and treatments; was occasionally incontinent and was marked for short-term memory, memory/recall and decision-making impairments, and falls. The undated "Negotiated Service Agreement" (NSA) directed facility staff to provide R119 with physical assistance for bathing and transfers; supervision for dressing, toileting, and bladder incontinence; and she used a walker for walking mobility. Management of medications and treatments, cognition, and falls were not addressed on the "NSA." R119's record lacked evidence an "FCS" was completed on or before the date of her admission to the facility. On 10/20/22 at approximately 09:05 AM Administrative Staff A and B confirmed R119's "FCS" lacked evidence it was completed on or before admission. The operator failed to conduct a "FCS" for R119 based on her needs and preferences on or before admission.	S5080		

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S5085 SS=E	26-42-201 (c) Functional Capacity Screen Reassessment (c) Designated staff shall conduct a screening to determine each resident ' s functional capacity according to the following requirements: (1) At least once every 365 days; (2) following any significant change in condition as defined in K.A.R. 26-39-100; and (3) at least quarterly if the resident receives assistance with eating from a paid nutrition assistant. This REQUIREMENT is not met as evidenced by: KAR 26-42-201(c)(2) The facility reported a census of five residents with three included in the sample. Based on interview and record review the operator failed to complete a "Functional Capacity Screen" (FCS) for Residents' (R) 119 and 120 following a significant change in condition. Finding included: - Record review for R119 revealed an admission date of 09/10/22 with the following diagnoses: dementia, Crohn's disease, and chronic obstructive pulmonary disorder (COPD). The undated "FCS" identified R119 required physical assistance with dressing, toileting, and walking/mobility. The undated "Negotiated Service Agreement" (NSA) directed facility staff to provide R119 supervision (not physical assistance as indicated	S5085		

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S5085	Continued From page 3 on "FCS") for dressing, toileting, and walking/mobility. On 10/20/22 at approximately 09:05 AM Administrative Staff A stated R119 had improved and no longer needed physical assistance with dressing, toileting, and walking/mobility but only required supervision. On 10/20/22 at approximately 09:05 AM Administrative Staff B confirmed R119 should have had a significant change "FCS" completed. - Record review for R120 revealed an admission date of 05/27/21 with a diagnosis of atherosclerotic heart disease. The 05/30/22 "FCS" identified R120 required physical assistance with bathing. The 05/30/22 "NSA" identified facility staff would provide physical assistance two times weekly for bathing. The 05/30/22 "Healthcare Service Plan" (HCP) directed facility that a hospice home health aide would provide assistance with bathing. On 10/20/22 at approximately 09:05 AM Administrative Staff A stated R120 was no longer on hospice, a hospice aide no longer came to the facility, and facility staff provided physical assistance with bathing. On 10/20/22 at approximately 09:05 AM Administrative Staff B confirmed R120 should have had a significant change "FCS" completed due to being discharged from hospice care.	S5085		

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S5085	Continued From page 4 The operator failed to ensure an "FCS" was completed for R119 and R120 following a significant change.	S5085		
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 five residents with three included in the sample. Based on interview and record review the operator failed to ensure Residents' (R) 119 and 120 "Negotiated Service Agreements" (NSA) described the services they would receive based on their "Functional Capacity Screens" (FCS).	S5105		

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S5105	Continued From page 5 Finding included: - Record review for R119 revealed an admission date of 09/10/22 with the following diagnoses: dementia, Crohn's disease, and chronic obstructive pulmonary disorder (COPD). The undated "FCS" identified R119 required physical assistance with dressing, toileting, and walking/mobility; she was unable to perform management of medications and treatments; she was marked for short-term memory, memory/recall, and decision-making impairments, and falls. The undated "NSA" directed facility staff to provide R119 supervision (not physical assistance as indicated on "FCS") for dressing, toileting, and walking/mobility. The undated "NSA" failed to identify services R119 would receive to keep her safe with management of medications and treatments, cognition, and falls. - Record review for R120 revealed an admission date of 05/27/21 with a diagnosis of atherosclerotic heart disease. The 05/30/22 "FCS" identified R120 had memory recall and decision-making cognitive impairment and was marked for impaired hearing and impaired decision-making. The 05/30/22 "NSA" failed to identify the services he would receive to keep him safe with cognitive impairment, impaired hearing, and impaired decision-making.	S5105		

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S5105	Continued From page 6 On 10/20/22 at approximately 09:05 AM Administrative Staff A and B confirmed services provided to R119 on the "NSA" to keep her safe with dressing, toileting, and walking/mobility were not based on the "FCS" and that services to keep safe with management of medications and treatments, cognition, and falls were not addressed. On 10/20/22 at approximately 09:05 AM Administrative Staff A and B confirmed R120's "NSA" failed to describe the services he would receive to keep him safe with cognitive impairment, impaired hearing, and impaired decision-making. The operator failed to ensure R119 and R120's "NSA's" described the services they would receive based on their "FCS's."	S5105		
S5115 SS=D	26-42-202 (c) Admission Negotiated Service Agreement (c) Each administrator or operator shall ensure the development of an initial negotiated service agreement at admission. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(c) The facility reported a census of five residents with three residents included in the sample. Based on interview and record review the operator failed to complete a "Negotiated Service Agreement" (NSA) for Resident (R) 119 based on	S5115		

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S5115	Continued From page 7	S5115		

her needs and preferences on or before admission.

Findings included:

- Record review for R119 revealed an admission date of 09/10/22 with the following diagnoses: dementia, Crohn's disease, and chronic obstructive pulmonary disorder (COPD).

The undated "Functional Capacity Screen" (FCS) identified R119 required physical assistance with bathing, dressing, toileting, transfers, and walking/mobility; she was unable to perform management of medications and treatments; was occasionally incontinent and was marked for short-term memory, memory/recall, and decision-making impairments, and falls.

The undated "NSA" directed facility staff to provide R119 with physical assistance for bathing and transfers; supervision for dressing, toileting, and bladder incontinence; and she used a walker for walking mobility. Management of medications and treatments, cognition, and falls were not addressed on the "NSA".

R119's record lacked evidence an "NSA" was completed on or before the date of her admission to the facility.

On 10/20/22 at approximately 09:05 AM Administrative Staff A and B confirmed R119's "NSA" lacked evidence it was completed on or before admission.

The operator failed to conduct an "NSA" for R119 based on her needs and preferences on or

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S5115	Continued From page 8 before admission.	S5115		
S5126 SS=D	26-42-202 (h) NSA Signatures (h) Each individual involved in the development of the negotiated service agreement shall sign the agreement. The administrator or operator shall ensure that a copy of the initial agreement and any subsequent revisions are provided to the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(h) The facility reported a census of five residents with three residents included in the sample. Based on interview and record review the operator failed to obtain signatures of each individual involved in the development of the "Negotiated Service Agreement" (NSA) for Resident (R) 119. Findings included: - Record review for R119 revealed an admission date of 09/10/22 with the following diagnoses: dementia, Crohn's disease, and chronic obstructive pulmonary disorder (COPD). The undated "Functional Capacity Screen" (FCS) identified R119 required physical assistance with bathing, dressing, toileting, transfers, and walking/mobility; she was unable to perform management of medications and treatments; was occasionally incontinent and was marked for	S5126		

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S5126	Continued From page 9 short-term memory, memory/recall, and decision-making impairments, and falls. The undated "NSA" directed facility staff to provide R119 with physical assistance for bathing and transfers; supervision for dressing, toileting, and bladder incontinence; and she used a walker for walking mobility. Management of medications and treatments, cognition, and falls were not addressed on the "NSA". R119's "NSA" was signed by her legal representative. R119's "NSA" lacked the signature of the licensed nurse that participated in the development of the "NSA". On 10/20/22 at approximately 09:05 AM Administrative Staff A and B confirmed R119's "NSA" lacked the required signature. The operator failed to obtain signatures of each individual involved in the development of the "NSA" for R119.	S5126		