STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087199	A. BUILDING: _____ B. WING _____	01/05/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUNFLOWER Z HOMES LLC	524 N MAIN STREET GARDEN PLAIN, KS 67050

(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 an abbreviated survey for complaints #'s 177133, 176438, and 176295 of the above named facility conducted on 01/05/2023.	S 000		
S 195 SS=D	26-39-102 (f) Discharge Notice (f) The administrator or operator, or the designee, shall provide a notice of transfer or discharge in writing to the resident or resident ' s legal representative at least 30 days before the resident is transferred or discharged involuntarily, unless one of the following conditions is met: (1) The safety of other individuals in the adult care home would be endangered. (2) The resident's urgent medical needs require an immediate transfer to another health care facility. This REQUIREMENT is not met as evidenced by: K.A.R 26-39-102 (f) The facility reported a census of six "Residents'" (R). The sample included one closed record review. Based on interview and record review the operator failed to provide R1 and their legal representative a written thirty-day notice of discharge when the resident was admitted to the hospital and the facility refused to re-admit R1 back to the facility, stating the facility could not meet the medical/health care needs for R1.	S 195		

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

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S 195	Continued From page 1 Findings included: - Record review on 01/05/22 of R1 "Negotiated Service Agreement" (NSA) identified the facility staff would perform the following health care services: Staff would assist R1 with dressing, oral care, and check and change resident when she was incontinent. R1 required a wheelchair for mobility and a mechanical lift and two staff members for transfers. R1 required repositioning every two hours and an air mattress for preventative skin care. The facility nurse would perform simple wound care. Record review of R1 "Nurses Care Notes" revealed the following entries: 10/27/22 "Resident re-admitted to the facility. Staff continue to assist with all activities of daily living, resident able to feed self and has a good appetite. Oxygen is at two liters nasal canula and vital signs and oxygen level within normal limits. Outside provider nurse to come out on 10/28/22 to change dressing to right back of upper leg and re assess right toe (big) wound. Nurse has been covering with band aid until outside provider nurse able to reassess wound. No other concerns". 10/28/22 "Dressing changes done by outside provider registered nurse to right gluteal fold and right great toe per orders. 11/7/22 "Wound measurements to right great toe 1.5 centimeters by 1 centimeter and it had green tarnish drainage. Dressing continues to get changed daily. Outside provider nurse swabbed wound and results are pending.	S 195		

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S 195	Continued From page 2 11/14/22 "Resident had appointment with podiatrist today results of culture under labs grew out four microorganisms. Dressing changed to two to three times a day and as needed. Wound did have methicillin resistant Staphylococcus aureus precautions in place. Client staying in room, wound is covered. Starting two different antibiotics and pharmacy delivers". 12/05/22 at 04:00 PM "changed dressing to right great toe. She now has a second area that is open one centimeter by 0.2 centimeters as well as the original opening. Toe is reddened. Tender, and swollen. Reported to outside provider nurse and changed dressing per order. 12/08/22 at 10:05AM "outside provider nurse cane and cultured, resident toe and changed dressing. Outside provider nurse will update when we get results". 12/19/22 at 0905AM "outside provider was out on the weekend to change resident dressing 12/18/22, staff reports increased agitation at night. Staff reached out to outside provider they are coming today to get a urine sample". 12/20/22 at 0910AM "outside provider staff was here yesterday to obtain a urine sample. Unable to get sample via straight catheter. Outside provider stated her on Macrobid and Vancomycin for seven days for suspected urinary tract infection. 12/21/22 at 0920AM "called emergency medical services while talking with outside provider,	S 195		

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S 195	Continued From page 3 resident is running a fever and not verbally responding, resident is very lethargic. Vital signs are; fever 100.1 degrees Fahrenheit, oxygen 90%, 87 heart beats per minute, blood pressure 94/48 and respirations 18 per minute. Interview with Operator A on 01/05/23, she stated when she was contacted by the social worker from the outside provider coordinating care for R1, she reported that she told the individual the facility would not be accepting/re-admitting R1. She stated the reason the facility would not re-admit R1 is because she felt that the facility could not meet the healthcare needs of R1. She continued to confirm that she did not provide a thirty-day notice to the legal representative for R1 because R1 was still in the hospital and not currently at the facility. The operator failed to provide R1 and their legal representative a written thirty-day notice of discharge when the resident was admitted to the hospital and the facility refused to re-admit R1 back to the facility, stating the facility could not meet the medical/health care needs for R1.	S 195		