

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: B046075	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/06/2023
NAME OF PROVIDER OR SUPPLIER TOPCARE HOME PLUS LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 20687 W 125TH CT OLATHE, KS 66061		
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S 000	INITIAL COMMENTS The following citations represent the findings of an initial licensure survey for the above named Home Plus facility conducted on 04/05/23 and 04/06/23.	S 000		
S5085 SS=D	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 four residents(R). The sample included three residents. Based on observation, interview, and record review the operator failed to ensure designated staff completed a resident "Functional Capacity Screen" for one (R3) of three sampled residents following a significant change in condition as defined in KAR 26-39-100. Findings Included: - Review of R3s medical record revealed he moved into the facility on 10/19/21 with	S5085		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S5085	Continued From page 1 diagnoses of hypertension, anxiety, and edema R3's most recent "Functional Capacity Screen" (FCS) dated 01/12/23 identified the resident needed physical assistance with bathing but was independent with dressing, toileting, transfers, and walking. An interview on 04/06/23 at 08:41 AM Certified Medication Aide B reported staff help give R3 his showers, when he is incontinent, they help change his clothes and brief, they help him with using his urinal during the night by holding it because he is afraid he is going to fall. They also help him get dressed and walk with him when he feels weak or dizzy. On 04/06/23 at 12:09 PM Administrative Licensed Nurse A reported R3's need for help varies depending on if he is anxious or scared of falling. Staff A acknowledged that there are times staff must provide physical assistance for R3 with dressing, toileting, transfers and walking and that she should have completed a new FCS. The operator failed to ensure designated staff completed R3's FCS when he started to require physical assistance with cares.	S5085		
S5105 SS=F	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	S5105		

Kansas Department on Aging

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S5105	Continued From page 2 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 four residents(R). The sample included three residents. Based on interview and record review for three (R3, R4, R5) of three sampled residents the operator failed to ensure designated staff developed a "Negotiated Service Agreement" that included what services would be provided based on the "Functional Capacity Screen" and the resident's service needs. For all residents, the operator failed to ensure their "Negotiated Service Agreement included the identification of the provider of each service. Findings included: - Review of R3s medical record revealed he moved into the facility on 10/19/21 with diagnoses of hypertension, anxiety, and edema R3's "Functional Capacity Screen" (FCS) dated 01/12/23 identified the resident needed physical assistance with bathing but was independent	S5105		

Kansas Department on Aging

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S5105	Continued From page 3 with dressing, toileting, transfers, and walking. He was also at risk for falls and unable to manage his medications or medical treatments. R3's "Negotiated Service Agreement" (NSA) dated 01/12/23 at the top of the page included "In this negotiated service agreement you will find the services that we provide to you/loved ones." The NSA included check marks as to the level of assistance the resident needed but did not identify "who" provided the service. For management of medications, it identified "staff" would administer medications and failed to identify Certified Medication Aides and/or a Licensed Nurse were the only "staff" qualified to administer medications. The NSA failed to include "who" provided the services. Review of R3's progress notes included documentation of receiving foot care in the facility, but the NSA failed to include R3 received the service, who provide the service and since it was from an outside resource who paid for the service. On 04/06/23 at 12:20 PM Administrative Licensed Nurse A acknowledged the NSA did not clearly identify who provided different services and did not include the services R3 received for foot care. Administrative Staff A also reported that all residents had basically the same format for their NSA and would just say "staff" instead of identifying specifically if it was certified staff or not providing the care. The operator failed to ensure R3's NSA was developed based on his service needs and identified what service would be provided, who	S5105		

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S5105	Continued From page 4 provided the service and if provided by an outside resource it included who paid for the service. - Review of R4's medical record revealed she moved into the facility on 08/25/21 with diagnoses of delusions and dementia. R4's "Functional Capacity Screen" dated 05/06/22 identified the resident needed physical assistance with bathing, dressing, toileting, transfers, and mobility. She also had a risk for falls, bladder incontinence and unable to manage her medications and medical treatments. R4's "Negotiated Service Agreement" dated 05/06/22, at the top of the page, "In this negotiated service agreement you will find the services that we provide to you/loved ones." It included a subtitle "Services" and below included bathing, dressing, toileting, transfers, mobility, and dining. The NSA failed to identify "who" provided the above listed services. Review of the resident progress notes included documentation that the resident received dental services in-house by a local dental provider. On 04/06/23 at 11:19 AM Administrative Licensed Nurse acknowledged the NSA did not include "who" provided the resident assistance with activities of daily living and failed to include the resident received dental services from a local dental company. The operator failed to ensure R4's NSA was developed based on her service needs and identified what service would be provided, who	S5105		

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S5105	Continued From page 5 provided the service and if provided by an outside resource it included who paid for the service. - Review of R5's medical record revealed he moved into the facility on 02/17/23 with diagnoses of hypertension and anxiety. R5's Functional capacity screen identified he needed physical assistance with bathing, supervision with dressing and toileting, was unable to manage his medications and had a risk for falls. R5's "Negotiated Service Agreement" (NSA) dated 02/17/23 at the top of the page included "In this negotiated service agreement you will find the services that we provide to you/loved ones." The NSA included check marks as to the level of assistance the resident needed but did not identify "who" provided the service. For management of medications, it identified "staff" would administer medications and failed to identify Certified Medication Aides and/or a Licensed Nurse were the only "staff" qualified to administer medications. The NSA failed to include "who" provided the services. On 04/06/23 at 09:53 AM Administrative Licensed Nurse A acknowledged the NSA did not identify who provided health care services for R5. The operator failed to ensure R5's NSA included the identification of the provider for each service he and other residents of the facility received.	S5105		

Kansas Department on Aging

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S5116	Continued From page 6	S5116		
S5116 SS=D	26-42-202 (d) NSA revisions (d) Each administrator or operator shall ensure the review and, if necessary, revision of each negotiated service agreement 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; (3) at least quarterly if the resident receives assistance with eating from a paid nutrition assistant; and (4) if requested by the resident or the resident ' s legal representative, staff, the case manager, or, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(d)(2) The facility reported a census of four residents (R). The sample included three residents. Based on observation, interview and record review the operator failed to ensure the review and if necessary, the revision of the negotiated service agreement for one (R3) of three sampled residents following any significant change in condition, as defined in KAR 26-39-100. Findings Included: - Review of R3s medical record revealed he moved into the facility on 10/19/21 with diagnoses of hypertension, anxiety, and edema	S5116		

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S5116	Continued From page 7 R3's most recent "Functional Capacity Screen" (FCS) dated 01/12/23 identified the resident needed physical assistance with bathing but was independent with dressing, toileting, transfers, and walking/mobility. R3's most recent 'Negotiated Service Agreement' (NSA) dated 01/12/23 identified staff would provide moderate assistance with bathing and dressing but identified he was independent with toileting, transes and walking/mobility. An interview on 04/06/23 at 08:41 AM Certified Medication Aide B reported staff had to help give R3 his showers, when he is incontinent, they help change his clothes and brief, they help him with using his urinal during the night by holding it because he is afraid, he is going to fall. They also must help him get dressed and walk with him when he feels weak or dizzy. On 04/06/23 at 12:09 PM Administrative Licensed Nurse A reported R3's need for help varies depending on if he is anxious or scared of falling. Staff A acknowledged she should have revised the NSA to identify staff were helping with toileting, transfers, walking/mobility when he was dizzy or anxious about possible falling. The operator failed to ensure the review and if necessary, the revision of each negotiated service agreement for R3 following any significant change in condition, as defined in KAR 26-39-100.	S5116		
S5258 SS=E	26-42-102 (d) Staff Qualifications Employee Records	S5258		

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S5258	Continued From page 8 (d) The employee records and agency staff records shall contain the following information: (1) Evidence of licensure, registration, certification, or a certificate of successful completion of a training course for each employee performing a function that requires specialized education or training; (2) supporting documentation for criminal background checks of facility staff and contract staff, excluding any staff licensed or registered by a state agency, pursuant to K.S.A. 39-970 and amendments thereto; (3) supporting documentation from the Kansas nurse aide registry that the individual does not have a finding of having abused, neglected, or exploited a resident in an adult carehome; and (4) supporting documentation that the individual does not have a finding of having abused, neglected, or exploited any resident in an adult care home, from the nurse aide registry in each state in which the individual has been known to work as a certified nurse aide. This REQUIREMENT is not met as evidenced by: KAR 26-42-102(d)(1)(2) The facility reported a census of four residents. Based on record review and interview, the operator failed to provide evidence of registration, and certification check completion upon hire for five of five newly hired staff that required specialized education and training. The operator also failed to have evidence of completing the required criminal background check upon hire for one of five newly hired staff.	S5258		

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S5258	Continued From page 9 This had the potential to affect all residents who resided in the facility. Findings included: - Review of five newly hired employee records revealed the following: Administrative Licensed Nurse A hired on 08/02/21 had a licensure check completed on 01/30/22, 4 months after her hire date. Certified Nurse Aide C was hired on 08/28/21 and her employee record included a registry check without a date on it to verify when it was completed. Certified Medication Aide D was hired on 02/20/22 and her employee record included a registry check without a date on it to verify when it was completed. Her record also failed to include evidence of completion of the required criminal background check. Certified Medication Aide E was hired on 07/08/22 and her employee file included a registry check without a date on it to verify when it was completed. Certified Nurse Aide F was hired on 11/14/22 and her employee file included a registry check without a date on it to verify when it was completed. On 04/05/23 at 01:49 PM Administrative Licensed Nurse A acknowledged the registry checks and the required criminal background checks needed to be completed when someone	S5258		

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S5258	Continued From page 10 is hired. The operator failed to ensure newly hired employee records contained evidence of registration/certification check and completion of the required criminal background checks to be completed upon hire.	S5258		