STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N087069	A. BUILDING: _____ B. WING _____	07/10/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REGENT PARK ASSISTED LIVING AND MEMORY CAF	10600 E 13TH STREET NORTH WICHITA, KS 67206

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S 000	INITIAL COMMENTS The following citations represent the findings of a resurvey with a complaint #180883 and 181085 at the above named Assisted Living conducted on 06/29/23, 07/05/23, 07/06/23 and 07/10/23.	S 000		
S3085 SS=E	26-41-202 (a) Negotiated Service Agreement (a) The administrator or operator of each assisted living facility or residential health care facility 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 26-41-202(a)(1)(2) The facility reported a census of 74 residents with six residents included in the sample. Based on interview, and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) was fully developed on what	S3085		

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

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S3085	Continued From page 1	S3085		

triggered in the "Functional Capacity Screen" (FCS) for resident (R)102, R104, R105 and R106. R105's NSA did not identify that a home health agency provided wound care for a pressure wound.

Findings included:

- R102's medical record revealed the resident moved into the facility on 09/06/22.

The 03/28/23. The FCS identified R102 triggered for impaired vision, impaired decision-making and wandering.

The 03/28/23 NSA did not address impaired vision, impaired decision-making and wandering.

On 07/10/23 at 12:30 PM Administrative Nurse B acknowledged not everything that triggered on R102's FCS was addressed on the NSA.

The operator failed to ensure R102's NSA was fully developed to include all items that triggered on the FCS.

- R104's medical record revealed she moved into the facility on 01/11/23.

The 01/11/23 FCS identified R104 required physical assistance with walking/mobility.

The 01/11/23 NSA did not address how staff were to provide physical assist for R104 with walking/mobility.

On 07/10/23 at 12:32 PM Administrative Nurse B

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S3085	Continued From page 2	S3085		

acknowledged R104's NSA did not address how staff were to assist with walking/mobility.

The operator failed to ensure R104's NSA was fully developed to include all items that triggered on the FCS.

- R105's medical record revealed she moved into the facility on 06/20/23.

The 06/21/23 FCS identified R105 triggered for falls.

The 06/21/23 NSA did not address falls and did not identify the home health agency provided wound care for R105's pressure wound.

On 07/10/23 at 12:34 PM Administrative Nurse B acknowledged R105's NSA did not address falls and did not identify that a home health agency provided wound care services for the treatment of a pressure wound.

The operator failed to ensure R105's NSA was fully developed to include all items that triggered on the FCS and to identify the home health agency that provided wound care services.

- R106's medical record revealed she moved into the facility on 03/13/23.

The 03/13/23 FCS identified R106 required physical assistance with walking/mobility.

The 03/13/23 NSA did not address how staff assisted R106 with walking/mobility.

On 07/10/23 at 12:27 PM Administrative Staff B

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S3085	Continued From page 3 acknowledged R106's NSA did not address everything that triggered on the FCS. The operator failed to ensure R106's NSA was fully developed to include all items that triggered on the FCS.	S3085		
S3101 SS=F	26-41-202 (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 26-41-202(h) The facility reported a census of 74 residents. The sample included six residents. Based on interview, and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) for resident (R)101, 102, 103 and 106 were signed by all individuals involved in the development of the NSA. Findings included: - R101's medical record revealed the resident moved into the facility on 10/16/15. The 02/26/23 NSA documented signatures for	S3101		

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S3101	Continued From page 4	S3101		

the Residence Director and Health Care Coordinator but was not signed by R101's durable power of attorney (DPOA).

On 07/06/23 at 04:15 PM Administrative Nurse B stated a copy of the NSA was emailed to R101's DPOA but she did not have an actual signed copy of the NSA on file.

The 07/01/12 "Negotiated Service Agreement" policy documented, "Each individual involved in the development of the Negotiated Service Agreement shall sign the agreement."

The operator failed to ensure R101's NSA was signed by all individuals involved in the development of the NSA.

- R102's medical record revealed the resident moved into the facility on 09/26/21.

The 03/28/23 NSA documented signatures for the Residence Director and Health Care Coordinator but was not signed by R102's durable power of attorney (DPOA).

On 07/06/23 at 04:17 PM Administrative Nurse B stated a copy of the NSA was emailed to R102's DPOA but she did not have an actual signed copy of the NSA on file.

The 07/01/12 "Negotiated Service Agreement" policy documented, "Each individual involved in the development of the Negotiated Service Agreement shall sign the agreement."

The operator failed to ensure R102's NSA was signed by all individuals involved in the

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S3101	Continued From page 5	S3101		

development of the NSA.

- R103's medical record revealed the resident moved into the facility on 07/27/22.

The 04/28/23 NSA documented signatures for the Residence Director and Health Care Coordinator but was not signed by R103's durable power of attorney (DPOA).

On 07/06/23 at 04:17 PM Administrative Nurse B stated a copy of the NSA was emailed to R103's DPOA but she did not have an actual signed copy of the NSA on file.

The 07/01/12 "Negotiated Service Agreement" policy documented, "Each individual involved in the development of the Negotiated Service Agreement shall sign the agreement."

The operator failed to ensure R103's NSA was signed by all individuals involved in the development of the NSA.

- R106's medical record revealed the resident moved into the facility on 03/13/23.

The printed copy of the 03/13/23 NSA did not have the signatures of those who were involved in the development of this document.

On 07/10/23 at 12:27 PM Administrative Nurse B stated she was not able to find a signed copy of R106's NSA.

The 07/01/12 "Negotiated Service Agreement" policy documented, "Each individual involved in the development of the Negotiated Service

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S3101	Continued From page 6 Agreement shall sign the agreement." The operator failed to ensure R106's NSA was signed by all individuals involved in the development of the NSA.	S3101		
S3310 SS=F	26-41-207 (b) (5-6) (c) Infection Control Policies (b) (5) prohibiting any employee with a communicable disease or any infected skin lesions from coming in direct contact with any resident, any resident ' s food, or resident care equipment until the condition is no longer infectious; (6) providing orientation to new employees and employee in-service education at least annually on the control of infections in a health care setting; and (c) Each administrator or operator shall ensure the facility ' s compliance with the department ' s tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105 This REQUIREMENT is not met as evidenced by: KAR 26-41-207(c) The facility reported a census of 74 residents. The sample included six residents. Based on interview and record review for five new employee records, the operator failed to ensure the facility remained in compliance with the department's tuberculosis (TB) guidelines for adult care homes adopted by reference in K.A.R. 26-39-105. This failure effected all residents who	S3310		

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S3310	Continued From page 7 lived in the assisted living facility. Findings included: - Review of three newly hired employee files revealed the following: Review of facility personnel records revealed Certified Medication Aide (CMA) D was hired on 04/11/23 but did not complete a TB Symptom Screening Questionnaire until 73 days after it was required to be completed. CMA E was hired on 05/16/23 but did not complete a TB Symptom Screening Questionnaire until 38 days after it was required to be completed. CMA F was hired on 08/16/22 and did not have the first step of the two-step TB skin test (TST) administered until 08/26/22 which was three days late. CMA G was hired on 03/14/23 and did not have the first step of the two-step TST administered until 04/21/23 which was 30 days late. The June 2013 "Tuberculosis (TB) Guidelines for Adult Care Homes" documented, "Each new ...employee shall have an initial TB symptom screen that includes the components of the Tuberculosis Symptom Screen Questionnaire within 7 days of ...employment ...Each new ...employee shall receive a two-step TST ...within 7 days of ...employment ..." The operator failed to ensure the facility	S3310		

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S3310	Continued From page 8 remained in compliance with the department's tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105.	S3310		