STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N008013	A. BUILDING: _____ B. WING _____	10/21/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE MAPLETON ANDOVER, LLC	1419 W CENTRAL AVE ANDOVER, KS 67002

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S 000	INITIAL COMMENTS The following represents the findings of a resurvey with attached complaint #189501 at the above named assisted living conducted on 10/21/24.	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) The facility reported a census of 19 residents with three residents included in the sample and one closed record review. Based on interview and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) for Resident (R)1 and R3 described the services they received based on their "Functional Capacity	S3085		

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

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S3085	Continued From page 1	S3085		

Screen" (FCS).

Findings included:

- Record review for R1 revealed an admission date of 10/16/23 with a diagnosis of dementia and repeated falls.

The 10/17/23 "FCS" identified R1 was unable to perform walking/mobility and had short-term and long-term memory, memory/recall, and decision-making cognitive difficulties.

The 10/17/23 "NSA" identified R1 " failed to describe services provided to R1 for walking/mobility and cognitive difficulties.

- Record review for R3 revealed an admission date of 10/03/24 with a diagnosis of A;zheimer's Disease.

The 10/03/24 "FCS" identified R3 had short-term and long-term memory, memory/recall, and decision-making cognitive difficulties; was rarely or never understandable and rarely or never understood others during communication; and was identified at risk for falls and wandering.

The 04/22/24 "NSA" failed to describe services provided to R3 for cognitive difficulties, communication, to prevent injury from falls, and wandering.

On 10/15/24 at appproximately 03:45 PM Administrative Staff A and Administrative Nurse B confirmed R1 and R3's "NSA" failed to describe services provided based on their "FCS."

The facility's undated "Negotiated Service Agreement (NSA)" Policy" documented the "NSA"

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S3085	Continued From page 2 must include a detailed description of services to be provided. The operator failed to ensure the "NSA" for R1 and R3 described the services they received based on their "FCS."	S3085		
S3165 SS=D	26-41-204 (d) Health Care Services (d) The negotiated service agreement shall contain a description of the health care services to be provided and the name of the licensed nurse responsible for the implementation and supervision of the plan. This REQUIREMENT is not met as evidenced by: KAR 26-41-204(d) The facility reported a census of 19 residents with three residents included in the sample and one closed record review. Based on interview and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) for Residents (R)3 named the licensed nurse responsible for implementing and supervising her "Healthcare Service Plan" (HSP). Findings included: - Record review for Resident (R)3 revealed an admission date of 10/03/24 with a diagnosis of Alzheimer's Disease. The 10/03/24 "Functional Capacity Screen " (FCS) identified R3 required physical assistance with bathing, dressing, toileting; was unable to	S3165		

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S3165	Continued From page 3	S3165		

perform management of medications and treatments; had short-term and long-term memory, memory/recall, and decision-making cognitive difficulties; was rarely or never understandable and rarely or never understood others during communication; and was identified at risk for falls, impaired decision-making, and wandering.

The 10/03/24 "NSA" identified facility staff would provide R3 assistance with bathing, dressing, and toileting; a certified medication aide (CMA) or licensed nurse administered all medications and completed treatments per physician's orders; and she had a power of attorney (POA) for impaired decision-making.

R1's "NSA" had a line to fill in for licensed Nurse responsible for supervision and implementation of Health Care Services" which was left blank.

On 10/22/24 at approximately 03:45 PM Administrative Staff A and Administrative Nurse B confirmed R3's "NSA" failed to name a nurse currently employed at the facility who was responsible for implementing and supervising her "HCP."

The facility's undated "Negotiated Service Agreement (NSA)" Policy" failed to address naming of the licensed nurse responsible for implementing and supervising the "NSA" for each resident.

The operator failed to ensure the "NSA" for R3 named the licensed nurse responsible for implementing and supervising her "HSP."

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S3299	Continued From page 4	S3299		
S3299 SS=F	26-41-206 (e) (1) Facility Food Storage (e) Food storage. Facility staff shall store all food under safe and sanitary conditions. (1) Containers of poisonous compounds and cleaning supplies shall not be stored in the areas used for food storage, preparation, or serving. This REQUIREMENT is not met as evidenced by: KAR 26-41-206(e) The facility reported a census of 19 residents. The facility had a main kitchen where dietary staff stored, prepared, and served food and a satellite kitchen in the assisted living where dietary staff stored and served food. Based on observation and interview the operator failed to ensure designated staff stored food items under safe conditions. Findings included: - Observation on 10/21/24 at 11:29 AM of the assisted living kitchen revealed two upright refrigerators that contained food items for the residents. One refrigerator contained the following prepared food items that lacked labels to identify the contents and a date the food was opened or prepared: One plastic cake container with partially consumed chocolate cake. One square plastic container with what appeared to be a partially consumed dessert with whipped topping and nuts on top. One individual serving size plate with what	S3299		

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S3299	Continued From page 5	S3299		

appeared to be a slice of fruit pie.
One large metal mixing bowl with what appeared to be pasta noodles with tomato sauce.
One divided blue meal container with a red lid.

On 10/21/24 at approximately 11:29 AM Administrative Staff A confirmed the assisted living refrigerator contained food items that lacked labels to identify the contents and a date the food was opened or prepared.

Observation on 10/21/24 at 11:41 AM of the memory care kitchen revealed two upright refrigerators that contained food items for the residents. The first refrigerator contained one metal mixing bowl with what appeared to be mandarin oranges. The bowl lacked a label to identify the contents and a date the food was prepared.

The second refrigerator contained one large metal mixing bowl with what appeared to be a yellowish pudding-like consistency food and lacked a label to identify the item and a date the item was prepared.

The second refrigerator also contained a two-pound container of Yoplait vanilla yogurt with a handwritten opened date of 09/12/24 which was 39 days at the date of the survey. The yogurt manufacturer stamped and expiration date on the which read 10/12/24 which was 9 days expired at the start of the survey.

On 10/21/24 at approximately 11:41 AM dietary staff C confirmed the memory care refrigerators contained food items that lacked labels to identify the contents and a date the food was opened or prepared and one yogurt that was expired.

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S3299	Continued From page 6 The August 2017 Kansas Department of Agriculture's "Focus on Food Safety" booklet documented food items could be held up to seven days if refrigeration was adequate at 41 degrees Fahrenheit or less. The facility's undated "Storage of Products" policy documented all refrigerated foods should be labeled with the name of the product and the preparation date. Foods that had been served must be discarded and would not be handled as a "left-over." The operator failed to ensure designated staff stored food items under safe conditions.	S3299		