STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N018010	A. BUILDING: _____ B. WING _____	02/06/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALDERBROOK VILLAGE LLC	402 WINDSOR ROAD ARKANSAS CITY, KS 67005

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S 000	INITIAL COMMENTS The following citations represent the findings of the licensure resurvey for the above named facility conducted on 02/05/25 and 02/06/25.	S 000		
S3101 SS=D	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: K.A.R. 26-41-202 (h) The facility reported a census of 36 residents. The sample included 3 "Residents" (R)'s 1, 2, and 3. Based on record review and interview the Operator failed to ensure each individual involved in the development of R1's "Negotiated Service Agreement" (NSA) signed the NSA. Findings included: - Record review for R1 revealed an admission date of 11/30/2017 with diagnoses of anxiety and type two diabetes. Review of R1's "Functional Capacity Screen" (FCS) dated 09/20/24 revealed R1 required physical assistance with bathing, dressing,	S3101		

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

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S3101	Continued From page 1 toileting, transferring, and walking. R1 lacked the ability to manage her own medications/medical treatments and was occasionally incontinent. R1's cognition was intact, and she was able to make herself understood and she understood others. Review of R1's NSA dated 11/23/24 identified the facility staff would provide observation when R1 would self-inject her insulin, manage R1's medications and medical treatments, provide assistance with bathing twice a week, provide assistance with dressing, and transferring. R1's NSA lacked the signatures of each individual involved in the development of R1's NSA. Interview on 02/06/24 at approximately 02:15 PM with Operator E confirmed R1's NSA lacked the signatures of each individual involved in the development of R1's NSA. The Operator failed to ensure each individual involved in the development of R1's NSA signed the NSA.	S3101		
S3165 SS=E	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	S3165		

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S3165	Continued From page 2 by: K.A.R. 26-41-204 (d) The facility reported a census of 36 residents. The sample included 3 "Residents" (R)'s 1, 2, and 3. Based on record review and interview the Operator failed to ensure the "Negotiated Service Agreement" (NSA) for R1 provided the name of the nurse responsible for the implementation and supervision of the health service plan. Findings included: - Record review for R1 revealed an admission date of 11/30/2017 with diagnoses of anxiety and type two diabetes. Review of R1's "Functional Capacity Screen" (FCS) dated 09/20/24 revealed R1 required physical assistance with bathing, dressing, toileting, transferring, and walking. R1 lacked the ability to manage her own medications/medical treatments and was occasionally incontinent. R1's cognition was intact, and she was able to make herself understood and she understood others. Review of R1's NSA dated 11/23/24 identified the facility staff would provide observation when R1 would self-inject her insulin, manage R1's medications and medical treatments, provide assistance with bathing twice a week, provide assistance with dressing, and transferring. R1's NSA lacked the name of the nurse responsible for the implementation and	S3165		

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S3165	Continued From page 3 supervision of the health service plan. Interview on 02/06/25 at approximately 02:15 PM with Operator E confirmed R1's NSA lacked the name of the nurse responsible for the implementation and supervision of the health service plan. The Operator failed to ensure the "Negotiated Service Agreement" (NSA) for R1 provided the name of the nurse responsible for the implementation and supervision of the health service plan.	S3165		
S3175 SS=E	26-41-205 (a) (1) Self Administration of Medication (a) Self-administration of medication. Any resident may self-administer and manage medications independently or by using a medication container or syringe prefilled by a licensed nurse or pharmacist or by a family member or friend providing this service gratuitously, if a licensed nurse has performed an assessment and determined that the resident can perform this function safely and accurately without staff assistance. (1) An assessment shall be completed before the resident initially begins self-administration of medication, if the resident experiences a significant change of condition, and annually. This REQUIREMENT is not met as evidenced	S3175		

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S3175	Continued From page 4 by: K.A.R. 26-41-205 (a) The facility reported a census of 36 residents. The sample included 3 "Residents" (R)'s 1, 2, and 3. Based on record review and interview the Operator failed to ensure a licensed nurse performed an assessment for R1 and R3, that determined that R1 and R3 could self-inject insulin safely, accurately and without staff assistance. Findings included: - Record review for R1 revealed an admission date of 11/30/2017 with diagnoses of anxiety and type two diabetes. Review of R1's "Functional Capacity Screen" (FCS) dated 09/20/24 revealed R1 required physical assistance with bathing, dressing, toileting, transferring, and walking. R1 lacked the ability to manage her own medications/medical treatments and was occasionally incontinent. R1's cognition was intact, and she was able to make herself understood and she understood others. Review of R1's NSA dated 11/23/24 identified the facility staff would provide observation when R1 would self-inject her insulin, manage R1's medications and medical treatments, provide assistance with bathing twice a week, provide assistance with dressing, and transferring. R1's medical record lacked an assessment determining she could safely, accurately and without staff assistance self-inject her insulin.	S3175		

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S3175	Continued From page 5	S3175		

- Record review for R3 revealed an admission date of 05/22/24 with diagnoses of hypoglycemia, seizure disorder, atrial fibrillation, and type two diabetes mellitus.

Review of R3's FCS dated 06/21/24 revealed R3 required supervision with bathing, and dressing. She lacked the ability to manage her own medial treatments and was occasionally incontinent. R3's cognition was intact, and she was able to make herself understood and she understood others. R3 was marked at risk for falls and had impaired vision. R3 used a walker mobility device.

Review of R3's NSA identified the facility staff would provide stand by assistance with bathing and perform blood glucose checks three to four times daily.

R3's NSA lacked the identification of who was managing her mediations.

R3's medical record lacked an assessment determining she could safely, accurately and without staff assistance self-inject her insulin.

Interview on 02/06/25 at approximately 02:15 PM with Operator E confirmed all insulin dependent residents in the facility dial and self-inject their insulin. Operator E further confirmed the medical records for R1 and R3 lacked documentation of an assessment determining that R1 and R3 could safely, accurately and without staff assistance dial and self-inject their insulin without staff assistance.

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S3175	Continued From page 6 The Operator failed to ensure a licensed nurse performed an assessment for R1 and R3, that determined that R1 and R3 could self-inject insulin safely, accurately and without staff assistance	S3175		
S3186 SS=E	26-41-205 (b) Administration of Selected Medications (b) Administration of select medications. Any resident who self-administers medication may select some medications to be administered by a licensed nurse or medication aide. The negotiated service agreement shall reflect this service and identify who is responsible for the administration and management of selected medications. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-205 (b) The facility reported a census of 36 residents. The sample included 3 "Residents" (R)'s 1, 2, and 3. Based on record review and interview the Operator failed to ensure the "Negotiated Service Agreement" (NSA) for R3 identified who was responsible of the administration and management of R3's insulin and select medications. Findings included:	S3186		

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S3186	Continued From page 7 - Record review for R3 revealed an admission date of 05/22/24 with diagnoses of hypoglycemia, seizure disorder, atrial fibrillation, and type two diabetes mellitus. Review of R3's FCS dated 06/21/24 revealed R3 required supervision with bathing, and dressing. She lacked the ability to manage her own medial treatments and was occasionally incontinent. R3's cognition was intact, and she was able to make herself understood and she understood others. R3 was marked at risk for falls and had impaired vision. R3 used a walker mobility device. Review of R3's NSA identified the facility staff would provide stand by assistance with bathing and perform blood glucose checks three to four times daily. R3's NSA lacked the identification of who was managing her mediations. Interview on 02/06/25 at approximately 02:15 PM with Operator E confirmed all insulin dependent residents in the facility dial and self-inject their insulin. Operator E further confirmed that R3's NSA lacked documentation of the identification of who was responsible for the administration of her insulin and select medications.	S3186		
S3248 SS=F	26-41-102 (d) Staff Qualifications Employee Records (d) The employee records and agency staff records shall contain the following documentation:	S3248		

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S3248	Continued From page 8 (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 care home; 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 have worked as a certified nurse aide. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-102 (d) (2) The facility reported a census of 36 residents. The sample included 3 "Residents" (R)'s and 5 newly hired employees. Based on record review and interview the Operator failed to ensure supporting documentation for criminal background checks of newly hired facility staff pursuant to K.S.A. 39-970 and amendments thereto; for "Certified Medication Aide" (CMA) A "Certified Nurse Aides'", (CNA)'s B and C, and	S3248		

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S3248	Continued From page 9 facility housekeeping staff E. Findings included: - Record review for newly hired CMA A revealed she began employment on 06/17/24. Review of CMA A's personnel record revealed it lacked documentation of a criminal background check pursuant to K.S.A. 39-970 and amendments thereto. Record review for newly hired CNA B revealed she began employment on 07/25/24. Review of CNA B's personnel record revealed it lacked documentation of a criminal background check pursuant to K.S.A. 39-970 and amendments thereto. Record review for newly hired CNA C revealed she began employment on 11/13/24. Review of CNA C's personnel record revealed it lacked documentation of a criminal background check pursuant to K.S.A. 39-970 and amendments thereto. Record review for newly hired housekeeping staff D revealed she began employment on 12/05/24. Review of housekeeping staff D's personnel record revealed it lacked documentation of a criminal background check pursuant to K.S.A. 39-970 and amendments thereto. Interview on 02/06/25 at approximately 02:15 PM with Operator E confirmed the newly hired personnel records for CMA A, CNA's B and C, and housekeeping staff D lacked documentation of a criminal background check pursuant to	S3248		

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S3248	Continued From page 10 K.S.A. 39-970 and amendments thereto. The Operator failed to ensure supporting documentation for criminal background checks of newly hired facility staff pursuant to K.S.A. 39-970 and amendments thereto; for CMA A, CNA's B and C, and facility housekeeping staff E.	S3248		
S3280 SS=E	26-41-104 (d) Disaster and Emergency Preparedness (d) Each administrator or operator shall ensure disaster and emergency preparedness by ensuring the performance of the following: (1) Orientation of new employees at the time of employment to the facility ' s emergency management plan; (2) education of each resident upon admission to the facility regarding emergency procedures; (3) quarterly review of the facility ' s emergency management plan with employees and residents; and (4) an emergency drill, which shall be conducted at least annually with staff and residents. This drill shall include evacuation of the residents to a secure location. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-104 (d) (3) The facility reported a census of 36 resident. Based on interview the Operator failed to ensure	S3280		

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S3280	Continued From page 11 disaster and emergency preparedness by ensuring the facility's emergency preparedness plan was reviewed with all residents quarterly. Findings included: - Interview on 02/06/25 at approximately 02:15 PM with Operator E confirmed the facility's lack of documentation of the quarterly review of the facility's emergency preparedness plan with all residents. Operator E confirmed all residents were provided the facility's emergency preparedness procedures at the time of admission. The Operator failed to ensure disaster and emergency preparedness by ensuring the facility's emergency preparedness plan was reviewed with all residents quarterly.	S3280		