STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087242	A. BUILDING: _____ B. WING _____	07/17/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN BOOMERS 2	6900 STONEGATE ST WICHITA, KS 67206

(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 the licensure resurvey for the above named facility conducted on 07/16/25 and 07/17/25.	S 000		
S5095 SS=D	26-42-201 (d) Functional Capacity Screen Accurate (d) Designated staff shall ensure that each resident ' s functional capacity at the time of screening is accurately reflected on that resident ' s screening form. This REQUIREMENT is not met as evidenced by: K.A.R. 26-42-201 (d) The facility reported a census of 8 residents. The sample included 3 "Residents'" (R). Based on record observation, interview and record review the Operator failed to ensure that the "Functional Capacity Screen" (FCS) at the time of the screening was accurately reflected on R3's screening form. Findings included: - Record review for R3 revealed an admission date of 05/28/25 with diagnoses of Hypertension, Diabetes Mellitus Type II, and history of Cerebral Vascular Accident. Review of R3's combined FCS/"Negotiated Service Agreement" (NSA)/ "Health Service Plan"	S5095		

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

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S5095	Continued From page 1 (HSP) dated 05/28/25 revealed the following: in the column titled FCS, R3 required physical assistance with bathing. Facility staff were instructed to provide supervision for bathing and for safety reasons or unsteadiness R3 "May require physical assistance into and out of the shower". R3 required supervision with dressing, toileting, transferring, mobility, and eating. Facility staff were instructed that R3 was independent with dressing, toileting, and mobility. The section titled transferring lacked instructions to facility staff for health care services to be provided. R3 was scored as unable to perform her own medication management and medical treatments. Staff were instructed R3 independently administered her own insulin and required someone to physically assist R3 with the administration of R3's medications and medical treatments. R3 was scored with impaired short-term memory, and she could "usually be understood" and make her needs known. Instructions to facility staff were R3 had word salad and most of what R3 said was not meaningful. She was not marked as using a mobility device. Observation on 07/16/25 at approximately 11:59 AM of R3 walking on the outside sidewalk from the door of a private home to a blue truck using her walker and one person walking beside her. Observation on 07/16/25 at approximately 03:30 of R3 walking from the west side of the home to the east side of the home. Interview on 07/17/25 at approximately 12:45 PM with R3 revealed she has a one-on-one staff to provide her meals when she leaves the facility to	S5095		

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S5095	Continued From page 2 go visit at a private residence. She stated she was independent with mobility using her walker assistive device. R3 confirmed that the bathroom she uses is on the east side of the facility and her room is located on the west side of the home and she confirmed she was independent with mobility, transfers, and toileting. R3 stated the staff administer her medications and she self-injects her own insulin. R3 spoke in complete sentences and followed the conversation changing topics and answering questions appropriately. R3 was able to recall events, and the interview lacked any evidence of word salad. The Operator failed to ensure that the "Functional Capacity Screen" (FCS) at the time of the screening was accurately reflected on R3's screening form.	S5095		
S5105 SS=D	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 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	S5105		

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S5105	Continued From page 3 payment if outside resources provide a service. This REQUIREMENT is not met as evidenced by: K.A.R. 26-42-202 (a) (1) (2) The facility reported a census of 8 residents. The sample included 3 "Residents'" (R). Based on record observation, interview and record review the Operator failed to ensure the "Negotiated Service Agreement" (NSA) contained a description of services and identification of the provider of the services for R3 when the Operator sent facility staff to provide cares and assistance to R3 when she went out to visit a private residence. Findings included: - Record review for R3 revealed an admission date of 05/28/25 with diagnoses of Hypertension, Diabetes Mellitus Type II, and history of Cerebral Vascular Accident. Review of R3's combined FCS/"Negotiated Service Agreement" (NSA)/ "Health Service Plan" (HSP) dated 05/28/25 revealed the following: in the column titled FCS, R3 required physical assistance with bathing. Facility staff were instructed to provide supervision for bathing and for safety reasons or unsteadiness R3 "May require physical assistance into and out of the shower". R3 required supervision with dressing, toileting, transferring, mobility, and eating. Facility staff were instructed that R3 was independent with dressing, toileting, and	S5105		

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S5105	Continued From page 4	S5105		

mobility. The section titled transferring lacked instructions to facility staff for health care services to be provided. R3 was scored as unable to perform her own medication management and medical treatments. Staff were instructed R3 independently administered her own insulin and required someone to physically assist R3 with the administration of R3's medications and medical treatments. R3 was scored with impaired short-term memory, and she could "usually be understood" and make her needs known. Instructions to facility staff were R3 had word salad and most of what R3 said was no meaningful. She was not marked as using a mobility device.

Observation on 07/16/25 at approximately 11:59 AM of R3 walking to on the outside sidewalk from the door of a private home to a blue truck using her walker and one person walking beside her.

Interview on 07/16/25 at approximately 03:15 PM with Operator A confirmed when R3 goes to visit the private residence she sends one-on-one staff to remain with the resident.

Interview on 07/17/25 at approximately 12:45 PM with R3 revealed she has a one-on-one staff to provide her meals when she leaves the facility to go visit at a private residence. She stated she was independent with mobility using her walker assistive device. R3 confirmed that the bathroom she uses is on the east side of the facility and her room is located on the west side of the home and she confirmed she was independent with mobility, transfers, and toileting. R3 stated the staff administer her medications and she self-injects her own insulin. R3 spoke in

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S5105	Continued From page 5 complete sentences and followed the conversation changing topics and answering questions appropriately. R3 was able to recall events, and the interview lacked any evidence of word salad. Interview on 07/17/15 at approximately 04:00 PM with Operator A confirmed R3's NSA lacked a description of services and identification of services when R3 left the facility with one-on-one staff to visit a private residence. The Operator failed to ensure the "Negotiated Service Agreement" (NSA) contained a description of services and identification of the provider of the services for R3 when the Operator sent facility staff to provide cares and assistance to R3 when she went out to visit a private residence.	S5105		