STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B088002	A. BUILDING: _____ B. WING _____	11/04/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOMESTEAD ESTATES HOME PLUS	1140 S PERSHING AVENUE LIBERAL, KS 67901

(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 represent the findings of a resurvey for the above named Home Plus facility conducted on 11/04/25.	S 000		
S5105 SS=E	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 payment if outside resources provide a service. This REQUIREMENT is not met as evidenced by: 5105 KAR 26-42-202(a)(1) The facility reported a census of eight residents with three residents included in the sample. Based on interview, and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) was fully developed based on the resident's "Functional Capacity Screen" (FCS), service needs, and preferences for	S5105		

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

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S5105	Continued From page 1 Resident (R)101, R102 and R103. Findings included: - R101's medical record revealed she moved into the facility on 06/02/25 with a diagnosis of atrial fibrillation. The 05/29/25 FCS identified R101 required physical assistance with management of treatments and triggered for falls, impaired vision and impaired hearing. The 06/02/25 NSA did not address R101's use of a bed assist device, management of treatments, falls, impaired vision, and impaired hearing. On 11/04/25 at 02:05 PM Administrative Staff A confirmed R101's NSA did not address all that triggered on her FCS to include the use of a bed assist device. The operator failed to ensure R101's NSA was fully developed to include all items that triggered in the FCS, her service needs, and preferences. - R102's medical record revealed she moved into the facility on 12/13/25 with a diagnosis of hypertension. The 12/03/24 FCS identified R102 was independent with transfers, required physical assistance with management of treatments and triggered for impaired vision and wandering. The 12/12/24 NSA did not address R102's use of a bed assist device, management of treatments,	S5105		

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S5105	Continued From page 2 impaired vision, and wandering. On 11/04/25 at 02:12 PM Administrative Staff A stated R102's NSA did not address management of treatments, the use of a bed assist device, wandering or impaired vision. The operator failed to ensure R102's NSA was fully developed to include all items that triggered in the FCS, her service needs, and preferences. - R103's medical record revealed he moved into the facility on 04/10/25 with a diagnosis of hypertension. The 04/10/25 FCS identified R103 was unable to manage his treatments and triggered for falls, impaired hearing and impaired vision. The 04/10/25 NSA did not address R103's management of treatments, falls, impaired hearing and impaired vision. On 11/04/25 at 02:21 PM Administrative Staff A confirmed that not all that triggered on R103's FCS was addressed on his NSA. The operator failed to ensure R103's NSA was fully developed to include all items that triggered on his FCS.	S5105		
S5126 SS=D	26-42-202 (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	S5126		

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S5126	Continued From page 3 the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: 5126 KAR 26-42-202(h) The facility had a census of 11 residents. Three residents were included in the sample. The facility failed to ensure each individual involved in the development of the "Negotiated Service Agreement" (NSA) signed the agreement for Resident (R)101. Findings included: - R101 admitted to the facility on 06/02/25 with a diagnosis of atrial fibrillation. The 05/29/25 "Functional Capacity Screen" (FCS) revealed R101 required physical assistance with the management of her medications and treatments. R101's NSA dated 06/02/25 did not include the signature of the licensed nurse involved in the development of the NSA. On 11/04/25 at 02:05 PM Administrative Staff A confirmed the nurse did not sign R101's NSA. The operator failed to ensure R101's NSA was signed by the licensed nurse involved in the development of the NSA.	S5126		

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S5130	Continued From page 4	S5130		
S5130 SS=D	26-42-202 (j) NSA Outside Resources (j) If a resident's negotiated service agreement includes the use of outside resources, the designated staff shall perform the following: (1) Provide the resident, the resident's legal representative, the case manager, and, if agreed to by the resident or resident ' s legal representative, the resident ' s family, with a list of providers available to provide needed services; (2) assist the resident, if requested, in contacting outside resources for services; and (3) monitor the services provided by outside resources and act as an advocate for the resident if services do not meet professional standards of practice. This REQUIREMENT is not met as evidenced by: 5130 KAR 26-42-202(j)(3) The facility reported a census of 11 residents three of which were included in the sample. Based on interview and record review the operator failed to ensure designated staff monitored services provided by outside resources for Resident (R)103 when nursing staff failed to ensure home health documentation were completed, reviewed and kept in R103's medical records. Findings included: - R103's medical record revealed he moved into the facility on 04/10/25 with a diagnosis of	S5130		

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S5130	Continued From page 5 hypertension. The 04/10/25 "Functional Capacity Screen" (FCS) revealed R103 was independent with toileting. The 04/10/25 "Negotiated Service Agreement" (NSA) documented a local home health agency changed out R103's urinary catheter monthly. Review of R103's medical records failed to locate documentation from the home health agency concerning care and management of R103's urinary catheter. On 11/04/25 at 01:43 PM R103 stated home health changed out his urinary catheter each month. On 11/04/25 at 02:21 PM Administrative Staff A stated there was no documentation in R103's from home health concerning the management of his catheter. The operator failed to ensure designated staff monitored the services provided to R103 by outside resources.	S5130		
S5195 SS=F	26-42-206 (f) (g) Facility Food Storage (f) Staff shall store all food under safe and sanitary conditions. Containers of poisonous compounds and cleaning supplies shall not be stored in the areas used for food storage, preparation, or serving. (g) Each home shall maintain at least a three-day supply of food to meet the requirements of the planned menus.	S5195		

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S5195	Continued From page 6 This REQUIREMENT is not met as evidenced by: 5195 KAR 26-42-206(f) The facility had a census of 11 residents. All 11 residents ate food prepared in the same kitchen. The operator failed to ensure food items were stored under safe and sanitary conditions by the failure to ensure foods stored in the refrigerators were kept at 41 degrees Fahrenheit (F) or lower according to Food Safety Guidelines. Findings included: - An observation of the kitchen on 11/04/25 at 09:19 AM revealed the refrigerator contained a plate of what looked to be a noodle dish covered with aluminum foil but was not dated. There was a Ziploc storage bag of bacon in the original package that was not dated as to when it was opened. There was an uncovered cookie sheet with cooked bacon and a sausage patty situated on the cook stove. On 11/04/25 at 09:25 AM Administrative Staff A confirmed no refrigerator/freezer temperatures have been logged and stated it was her expectation that the logs be completed by staff. According to the Kansas Department of Agriculture "Focus on Food Safety" revised August 2017, "Cold foods must be maintained at an internal temperature of 41F or below." "Date mark foods appropriately, cover foods after	S5195		

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S5195	Continued From page 7 completely cooled, cover foods to maintain cold holding temperature." The operator failed to ensure food items were stored under safe and sanitary conditions by failing to document refrigerator/freezer temperatures and ensuring opened food items were dated and properly covered.	S5195		
S5251 SS=D	26-42-105 (f) (11) Resident Records Documentation of Incidents (f) (11) documentation of all incidents, symptoms, and other indications of illness or injury including the date, time of occurrence, action taken, and results of the action. This REQUIREMENT is not met as evidenced by: 5251 KAR 26-42-105(f)(11) The facility reported a census of 11 residents. The sample included three residents. Based on observation, record review and interview the operator failed to ensure documentation on residents in accordance with accepted professional standards and practices including all incidents, symptoms, and other indications of illness or injury including the date, time of occurrence, action taken and results of the action for Resident (R)103. Findings included:	S5251		

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S5251	Continued From page 8	S5251		

-R103's medical record revealed he moved into the facility on 04/10/25 with a diagnosis of hypertension.

The 04/10/25 "Functional Capacity Screen" (FCS) indicated R103 was independent with transfers and walking by himself and utilized a walker for mobility. The FCS also identified R103 was at risk for falls.

The 04/10/25 "Negotiated Service Agreement" (NSA) did not address what services staff provided R103 to help prevent him from experiencing falls.

Review of R103's medical record failed to find any documentation of him having had falls since admission to the facility.

On 11/04/25 at 01:43 PM an observation of R103's apartment revealed R103 sat in his recliner located next to a walk-in closet and a four-wheeled walker located directly in front of him. R103 had a wound dressing applied to his left upper arm.

On 11/04/25 at 01:43 PM R103 stated he has had three falls since he was admitted to the facility. R103 stated he experienced the first two falls within the first couple of months of his stay and he stated he last fell about a week ago when he lost his balance while trying to get some socks out of a dresser located in his closet.

On 11/04/25 at 02:21 PM Administrative Staff A stated she was unable to locate any documentation in R103's medical records

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S5251	Continued From page 9 concerning him having had any falls. The operator failed to ensure documentation for R103's care was in accordance with accepted professional standards and practices.	S5251		
S5286 SS=D	26-42-205 (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: 5286 KAR 26-42-205(b) The facility reported a census of 11 residents. Based on interview, and record review the operator failed to ensure the "Negotiated Service Agreement" (NSA) for Resident (R)103 identified the person responsible for administration and management of selected medications. Findings included: -R103's medical record revealed he moved into the facility on 04/10/25 with a diagnosis of hypertension.	S5286		

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S5286	Continued From page 10 The 04/10/25 Functional Capacity Screen documented R103 was unable to manage his medications or treatments. The 04/10/25 NSA documented staff administered R103's medications. The NSA did not identify that R103 self-administered his Albuterol or his breathing treatment. On 11/04/25 at 02:21 PM Administrative Staff A confirmed R103's NSA did not identify which select medications R103 self-administered. The operator failed to ensure the NSA identified the person responsible for administration and management of R103's Albuterol and breathing treatments.	S5286		