STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087287	A. BUILDING: _____ B. WING _____	12/01/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARCELLA'S HOME CARE	4911 S. MERIDIAN AVE WICHITA, KS 67217

(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 an initial survey for the above named home plus conducted on 12/01/25.	S 000		
S5080 SS=D	26-42-201 (a) (b) Functional Capacity Screen on Admission (a) On or before each individual ' s admission to a home plus, a licensed nurse, a licensed social worker, or the administrator or operator shall conduct a screening to determine the individual ' s functional capacity and shall record all findings on a screening form specified by the department. The administrator or operator may integrate the department ' s screening form into a form developed by the home, which shall include each element and definition specified by the department. (b) A licensed nurse shall assess any resident whose functional capacity screening indicates the need for health care services. This REQUIREMENT is not met as evidenced by: KAR 26-42-201(a) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure designated staff conducted a screening to determine Resident (R) 1's functional capacity on or before his admission to the facility.	S5080		

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

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S5080	Continued From page 1 Findings included: - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 (two days after admission)Functional Capacity Screen "FCS" identified R1 was unable to perform bathing, dressing, toileting, transfers, walking/mobility, and management of medications and treatments. He was incontinent of bladder and had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication and was at risk for falls and impaired decision-making. The undated Negotiated Service Agreement "NSA" identified facility staff assisted R1 with bathing twice a week, assisted with dressing, and assisted with toileting regularly and as needed. One staff member assisted R1 with transfers, walking/mobility, and bladder incontinence. A Certified Medication Aide (CMA) or licensed nurse (LN) administered his medications. Facility staff monitored R1 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R1 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." R1's record lacked evidence of documentation of an "FCS" on or before admission.	S5080		

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S5080	Continued From page 2 On 12/01/25 at 03:30 PM Licensed Nurse C confirmed R1's record lacked evidence of documentation of an "NSA" at admission. The undated facility's "Functional Compacity [sic] Screening Policy and Procedure" documented all residents would have a "Functional Compacity [sic] Screening completed before in [sic] or on the day of the move" to the facility. The operator failed to ensure designated staff conducted a screening to determine R1's functional capacity on or before his admission to the facility.	S5080		
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: KAR 26-42-201(d) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure the "Functional Capacity Screen" (FCS) for Resident (R) 2 accurately reflected his functional capacity at the time of screening for cognition.	S5095		

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S5095	Continued From page 3 Findings included: - Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two diabetes mellitus and insomnia. The 10/06/25 "FCS" identified R2 had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties with a total score of "6" which was inaccurate. The undated "NSA" identified facility staff monitored R2 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. On 12/01/25 at approximately 03:15 PM Licensed Nurse (LN) C confirmed R2's "FCS" was not accurate for cognition. She stated the score should be "4." The undated facility's "Functional Compacity [sic] Screening Policy and Procedure" did not address accuracy. The operator failed to ensure the "FCS" for R2 accurately reflected his functional capacity at the time of screening for cognition.	S5095		
S5105 SS=F	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	S5105		

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S5105	Continued From page 4 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 26-42-202(a)(1) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure the "Negotiated Service Agreements" (NSAs) for Residents (R) 1, R2, and R3 described the services they received based on their "Functional Capacity Screens" (FCSs), needs, and preferences. Findings included: - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 "FCS" identified R1 was unable to perform management of treatments and was sometimes understandable and sometimes understood others during communication. He was at risk for falls and impaired decision-making.	S5105		

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S5105	Continued From page 5 The undated "NSA" failed to describe services R1 received for management of treatments, communication, falls, and impaired decision-making. On 12/01/25 at 03:30 PM Licensed Nurse (LN) C confirmed R1's "NSA" failed to describe the services he received for management of treatments, communication, falls, and impaired decision-making. - Record review for R2 revealed an admission date of 10/06/25 with a diagnosis of type two diabetes mellitus. The 10/06/25 "FCS" identified R2 was unable to perform management of treatments and was sometimes understandable and sometimes understood others during communication. He was at risk for falls and impaired decision-making. The undated "NSA" failed to describe the services R2 received for management of treatments, communication, falls, and impaired decision-making. On 12/01/25 at 03:15 PM LN C confirmed R2's "NSA" failed to describe the services he received for management of treatments, communication, falls, and impaired decision-making. - Record review for R3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia. The 10/20/25 "FCS" identified R3 was unable to perform management of treatments and was at	S5105		

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S5105	Continued From page 6 risk for falls and impaired decision-making. The undated "NSA" failed to describe the services R3 received for management of treatments, falls, and impaired decision-making. On 12/01/25 at 03:41 PM LN C confirmed R3's "NSA" failed to describe the services R3 received for management of treatments, falls, and impaired decision-making. The facility's undated "NSA Agreement" policy documented each "NSA" must include the resident's preferences or choices, identification of risks associated with choices, agreed-upon responsibilities of the resident, staff, and the facility, and strategies to minimize risk. The policy did not address descriptions of the services the residents received based on their FCS. The operator failed to ensure the "NSAs" for R1, R2, and R3 described the services they received based on their "FCSs," needs, and preferences.	S5105		
S5110 SS=F	26-42-202 (b) Negotiated Service Agreement Individualized (b) The negotiated service agreement shall promote the dignity, privacy, choice, individuality, and autonomy of the resident. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(b) The facility reported a census of three residents.	S5110		

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S5110	Continued From page 7 Based on record review and interview the operator failed to ensure the "Negotiated Service Agreements" (NSA) for each resident in the facility promoted their choices, individuality, and autonomy based on their needs and desires for Resident (R) 1, R2, and R3. Findings included: - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 (two days after admission) "Functional Capacity Screen" (FCS) identified R1 was unable to perform bathing, dressing, toileting, transfers, walking/mobility, and management of medications and treatments. He was incontinent of bladder and had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication and was at risk for falls and impaired decision-making. - Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two diabetes mellitus and insomnia. The 10/06/25 "FCS" identified R2 required physical assistance with bathing and dressing and supervision with toileting, transfers, and walking/mobility. He was unable to perform management of medications and treatments and was usually continent of bladder. He had short-term and long-term memory,	S5110		

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S5110	Continued From page 8	S5110		

memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication. R2 was at risk for falls and impaired decision-making.

- Record review for R3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia.

The 10/20/25 "FCS" identified R3 was unable to perform bathing and management of medications and treatments. He required supervision for dressing, transfers, walking/mobility, and eating, and was independent with toileting. R3 was occasionally incontinent of bladder. He had long-term memory and impaired decision-making cognitive difficulties and was at risk for falls and impaired decision making and inappropriate behaviors.

The undated "NSAs" for R1, R2, and R3 identified facility staff assisted each of them with bathing twice a week, assisted with dressing, and assisted with toileting regularly and as needed. One staff member assisted each one with transfers, walking/mobility, and bladder incontinence. A Certified Medication Aide (CMA) or licensed nurse (LN) administered each his medications. Facility staff monitored each one for cognitive changes and provided cues and redirection as needed for cognitive difficulties.

The "NSAs" for R1, R2, and R3 read the same with the only change being their name. The "NSAs" failed to promote the choice, individuality, and autonomy for Resident (R) 1, R2, and R3.

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S5110	Continued From page 9 On 12/01/25 at approximately 03:41 PM licensed nurse (LN) C confirmed the "NSAs" for all the residents failed to promote the choice, individuality, and autonomy based on their needs and desires. The facility's undated "NSA Agreement" policy documented each resident had the right to make choices about their daily routines, care, and services. The operator failed to ensure the "NSAs" for each resident in the facility promoted their choices, individuality, and autonomy based on their needs and desires for R1, R2, and R3.	S5110		
S5115 SS=F	26-42-202 (c) Admission Negotiated Service Agreement (c) Each administrator or operator shall ensure the development of an initial negotiated service agreement at admission. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(c) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure designated staff developed an initial "Negotiated Service Agreement" (NSA) for Residents (R) 1. R2, and R3 based on their "Functional Capacity Screen" (FCS), needs, and preferences at admission. Findings included:	S5115		

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S5115	Continued From page 10 - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 (two days after admission) FCS" identified R1 was unable to perform bathing, dressing, toileting, transfers, walking/mobility, and management of medications and treatments. He was incontinent of bladder and had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication and was at risk for falls and impaired decision-making. The undated "NSA" identified facility staff assisted R1 with bathing twice a week, assisted with dressing, and assisted with toileting regularly and as needed. One staff member assisted R1 with transfers, walking/mobility, and bladder incontinence. A Certified Medication Aide (CMA) or licensed nurse (LN) administered his medications. Facility staff monitored R1 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R1 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." R1's record lacked evidence of documentation of an "NSA" at admission. On 12/01/25 at 03:30 PM LN C confirmed R1's record lacked evidence of documentation of an	S5115		

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S5115	Continued From page 11	S5115		

"NSA" at admission.

- Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two diabetes mellitus and insomnia.

The 10/06/25 "FCS" identified R2 required physical assistance with bathing and dressing and supervision with toileting, transfers, and walking/mobility. He was unable to perform management of medications and treatments and was usually continent of bladder. He had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication. R2 was at risk for falls and impaired decision-making.

The undated "NSA" identified facility staff assisted R2 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R2 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R2 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R2 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA."

R2's record lacked evidence of documentation of an "NSA" at admission.

On 12/01/25 at 03:15 PM LN C confirmed R2's record lacked evidence of documentation of an

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S5115	Continued From page 12 "NSA" at admission. - Record review for R3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia. The 10/20/25 "FCS" identified R3 was unable to perform bathing and management of medications and treatments. He required supervision for dressing, transfers, walking/mobility, and eating, and was independent with toileting. R3 was occasionally incontinent of bladder. He had long-term memory and impaired decision-making cognitive difficulties and was at risk for falls and impaired decision making and inappropriate behaviors. The undated "NSA" identified facility staff assisted R3 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R3 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R3 for cognitive changes and provided cues and redirection as needed for cognitive difficulties and inappropriate behaviors. Services provided R3 for management of treatments, falls, and impaired decision making were not described on the "NSA." R3's record lacked evidence of documentation of an "NSA" at admission. On 12/01/25 at 03:41 PM LN C confirmed R3's record lacked evidence of documentation of an "NSA" at admission.	S5115		

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S5115	Continued From page 13 The facility's undated "NSA Agreement" policy documented an "NSA" was initiated when a resident requested a service or routine that differed from standard facility practices and when a resident's choice presented potential risks. The "NSA" policy did not address development of "NSAs" at admission. The operator failed to ensure designated staff developed an "NSA" for R1, R2, and R3 based on their "FCS," needs, and preferences at admission.	S5115		
S5126 SS=F	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 the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: KAR 26-42-202(h) The facility reported a census of three residents. Based on interview and record review the operator failed to obtain signatures of each individual involved in the development of the "Negotiated Service Agreements" (NSA) for Resident (R) 1, R2, and R3. Findings included:	S5126		

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S5126	Continued From page 14 - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 (two days after admission) "Functional Capacity Screen" (FCS) identified R1 was unable to perform bathing, dressing, toileting, transfers, walking/mobility, and management of medications and treatments. He was incontinent of bladder and had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication and was at risk for falls and impaired decision-making. The undated "NSA" identified facility staff assisted R1 with bathing twice a week, assisted with dressing, and assisted with toileting regularly and as needed. One staff member assisted R1 with transfers, walking/mobility, and bladder incontinence. A Certified Medication Aide (CMA) or licensed nurse (LN) administered his medications. Facility staff monitored R1 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R1 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." R1's "NSA" lacked the signatures of the nurse who participated in its development and the resident or his legal representative. On 12/01/25 at 03:30 PM LN C confirmed R1's "NSA" lacked signatures of all who participated	S5126		

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	B087287	A. BUILDING: _____ B. WING _____	12/01/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARCELLA'S HOME CARE	4911 S. MERIDIAN AVE WICHITA, KS 67217

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S5126	Continued From page 15 in its development. - Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two diabetes mellitus and insomnia. The 10/06/25 "FCS" identified R2 required physical assistance with bathing and dressing and supervision with toileting, transfers, and walking/mobility. He was unable to perform management of medications and treatments and was usually continent of bladder. He had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication. R2 was at risk for falls and impaired decision-making. The undated "NSA" identified facility staff assisted R2 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R2 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R2 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R2 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." R2's "NSA" lacked the signatures of the nurse who participated in its development and the resident or his legal representative. On 12/01/25 at 03:15 PM LN C confirmed R2's	S5126		

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S5126	Continued From page 16	S5126		

"NSA" lacked signatures of all who participated in its development.

- Record review for R3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia.

The 10/20/25 "FCS" identified R3 was unable to perform bathing and management of medications and treatments. He required supervision for dressing, transfers, walking/mobility, and eating, and was independent with toileting. R3 was occasionally incontinent of bladder. He had long-term memory and impaired decision-making cognitive difficulties and was at risk for falls and impaired decision making and inappropriate behaviors.

The undated "NSA" identified facility staff assisted R3 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R3 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R3 for cognitive changes and provided cues and redirection as needed for cognitive difficulties and inappropriate behaviors. Services provided R3 for management of treatments, falls, and impaired decision making were not described on the "NSA."

R3's "NSA" lacked the signatures of the nurse who participated in its development and the resident or his legal representative.

On 12/01/25 at 03:41 PM LN C confirmed R3's "NSA" lacked signatures of all who participated

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S5126	Continued From page 17 in its development. The facility's undated "NSA Agreement" policy documented the "NSAs" must be signed. The operator failed to obtain signatures of each individual involved in the development of the "NSAs" for all three residents.	S5126		
S5161 SS=F	26-42-204 (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 26-42-204(d) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure each resident's "Negotiated Service Agreements" (NSA) named the licensed nurse responsible for implementing and supervising their "Healthcare Service Plans" (HSP). Findings included: - Record review for R1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. The 11/20/25 (two days after admission)	S5161		

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S5161	Continued From page 18	S5161		

"Functional Capacity Screen" (FCS) identified R1 was unable to perform bathing, dressing, toileting, transfers, walking/mobility, and management of medications and treatments. He was incontinent of bladder and had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication and was at risk for falls and impaired decision-making.

The undated "NSA" identified facility staff assisted R1 with bathing twice a week, assisted with dressing, and assisted with toileting regularly and as needed. One staff member assisted R1 with transfers, walking/mobility, and bladder incontinence. A Certified Medication Aide (CMA) or licensed nurse (LN) administered his medications. Facility staff monitored R1 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R1 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA."

R1's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP."

On 12/01/25 at 03:30 PM LN C confirmed R1's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP."

- Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two

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S5161	Continued From page 19 diabetes mellitus and insomnia. The 10/06/25 "FCS" identified R2 required physical assistance with bathing and dressing and supervision with toileting, transfers, and walking/mobility. He was unable to perform management of medications and treatments and was usually continent of bladder. He had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication. R2 was at risk for falls and impaired decision-making. The undated "NSA" identified facility staff assisted R2 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R2 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R2 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R2 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." R2's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP." On 12/01/25 at 03:30 PM LN C confirmed R2's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP."	S5161		

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S5161	Continued From page 20 - Record review for R3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia. The 10/20/25 "FCS" identified R3 was unable to perform bathing and management of medications and treatments. He required supervision for dressing, transfers, walking/mobility, and eating, and was independent with toileting. R3 was occasionally incontinent of bladder. He had long-term memory and impaired decision-making cognitive difficulties and was at risk for falls and impaired decision making and inappropriate behaviors. The undated "NSA" identified facility staff assisted R3 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R3 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R3 for cognitive changes and provided cues and redirection as needed for cognitive difficulties and inappropriate behaviors. Services provided R3 for management of treatments, falls, and impaired decision making were not described on the "NSA." R1's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP." On 12/01/25 at 03:30 PM LN C confirmed R3's "NSA" failed to name the licensed nurse responsible for implementing and supervising his "HSP." The facility's undated "NSA Agreement" policy	S5161		

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S5161	Continued From page 21 did not address identification of the nurse responsible for supervising and implementing the "HSP." The operator failed to ensure the residents' "NSAs" named the licensed nurse responsible for implementing and supervising their "HSPs."	S5161		
S5230 SS=F	26-42-207 (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; (c) Each administrator or operator shall ensure the home ' 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 26-42-207(c) The facility reported a census of five residents. Based on interview and record review 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 KAR 26-39-105 for residents and staff.	S5230		

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S5230	Continued From page 22 Findings included: - Record review for Resident (R) 1 revealed an admission date of 11/18/25 with a diagnosis of chronic kidney disease. R1's record lacked evidence of documentation he received TB infection testing and symptom screen questionnaire. On 12/01/25 at 03:41 PM Licensed Nurse (LN) C confirmed R1's record lacked evidence of documentation he received TB infection testing and symptom questionnaire. - Record review for Resident (R) 2 revealed an admission date of 10/06/25 with diagnoses of insomnia and diabetes mellitus. The first page of the undated "TB Skin Test" form had a line for resident/employee signature and a line for the reviewer's signature. Both lines were blank. The second page of the "TB Skin Test" form was blank including dates administered, results, and dates results were read for a two-step test. On 12/01/25 at 02:54 PM LN C confirmed R2's record lacked evidence of documentation he received TB infection testing and symptom questionnaire. - Record review for Resident (R) 3 revealed an admission date of 10/22/25 with diagnoses of impaired cognition and schizophrenia.	S5230		

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S5230	Continued From page 23 R3's record lacked evidence of documentation he received TB skin testing and symptoms questionnaire. On 12/01/25 at 03:41 PM LN C confirmed R3's record lacked evidence of documentation he received TB infection testing and symptom questionnaire. - Record review for Certified Medication Aide (CMA) D revealed a hire date of 09/17/25. She received the first step of two-step TB skin test on 09/17/25 and the second step on 09/27/25 with results read on 10/04/25. A licensed nurse failed to read the TB test results within 48 to 72 hours. Record review for Certified Nurse Aide (CNA) E revealed a hire date of 09/19/25. She received the first step of two-step TB skin test on 09/19/25 and the second step on 09/30/25 with results read on 10/07/25. A licensed nurse failed to read the TB test results within 48 to 72 hours. Record review for CMA F revealed a hire date of 10/12/25. She received the first step of two-step TB skin test on 10/12/25 and the second step on 10/13/25. The results of the first step were read on 10/13/25. A licensed nurse failed to read the TB test results after at least 48 hours. On 12/01/25 at 04:28 PM Administrative Staff A and B confirmed staff records lacked evidence of documentation TB skin test results were read within guidelines. The undated facility's "Tuberculosis (TB) Skin Test Policy" documented all new residents and staff must have TB screening prior to or upon	S5230		

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S5230	Continued From page 24 admission or hire. The results would be read in 48-72 hours. The department's June 2013 "Tuberculosis (TB) Guidelines for Adult Care Homes" documented each new resident and each new employee shall have an TB test within seven days of admission or hire with a second step repeated in one to three weeks. The results of each test would be read in 48-72 hours. The operator failed to ensure the facility remained in compliance with the department's tuberculosis guidelines for adult care homes adopted by reference in KAR 26-39-105.	S5230		
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: KAR 26-42-105(f)(11) The facility reported a census of three residents. Based on interview and record review the operator failed to ensure a licensed nurse documented any incidents, symptoms and other indications of illness or injury including the date time of occurrence, action taken, and results of the action including admission to the facility and	S5251		

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S5251	Continued From page 25 for 14 days after admission for Resident (R) 2. Findings included: - Record review for R2 revealed an admission date of 10/06/25 with diagnoses of type two diabetes mellitus and insomnia. The 10/06/25 "FCS" identified R2 required physical assistance with bathing and dressing and supervision with toileting, transfers, and walking/mobility. He was unable to perform management of medications and treatments and was usually continent of bladder. He had short-term and long-term memory, memory/recall, and impaired decision-making cognitive difficulties. He was sometimes understandable and sometimes understood others during communication. R2 was at risk for falls and impaired decision-making. The undated "NSA" identified facility staff assisted R2 with bathing twice a week and one staff member assisted him with dressing. Staff assisted with toileting regularly and as needed. One staff member assisted R2 with transfers, walking/mobility, and bladder incontinence. A CMA or LN administered his medications. Facility staff monitored R2 for cognitive changes and provided cues and redirection as needed for cognitive difficulties. Services provided R2 for management of treatments, communication, falls, and impaired decision making were not described on the "NSA." Review of "Progress Notes Observed" from admission to 12/01/25 (start of the survey)	S5251		

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S5251	Continued From page 26 revealed the following: The 10/20/25 at 12:15 PM note (first note in record, 14 days after admission) by licensed nurse (LN) C documented she received an order from R2's outside provider for home health to obtain a sample for a urinalysis and culture and sensitivity lab test. R2's record lacked evidence of documentation of his admission. His record further lacked evidence of any signs, symptoms, and other indications of illness or injury including the date time of occurrence, action taken, and results of the action to prompt a need for a lab order. On 12/01/25 at 02:54 PM LN C confirmed R2's record lacked evidence of documentation of his admission and any signs, symptoms, and other indications of illness or injury including the date, time of occurrence, action taken, and results of the action to prompt a need for a lab order. The operator failed to ensure a licensed nurse documented any incidents, symptoms and other indications of illness or injury including the date time of occurrence, action taken, and results of the action including admission to the facility and for 14 days after admission for R2.	S5251		