STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CREDO SENIOR LIVING OF INDEPENDENCE	2120 N 13TH ST INDEPENDENCE, KS 67301

(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 with attached complaint numbers 191636 and 191471, for the above named facility conducted on 12/15/25 and 12/16/25.	S 000		
S3080 SS=D	26-41-201 (a) (b) Functional Capacity Screen on Admission a) On or before each individual ' s admission to an assisted living facility or residential health care facility, 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 facility, 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: K.A.R. 26-41-201 (a) The facility reported a census of 14 residents. The sample included 3 "Residents'"(R)'s. Based on record review and interview the Operator failed to ensure prior to or at the time of R1's admission, a screening was conducted to determine R1's functional capacity.	S3080		

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

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S3080	Continued From page 1 Findings included: - Record review for R1 revealed an admission date of 10/14/25. R1's electronic "Medical Record" lacked documentation of R1's medical diagnoses. Review of R1's electronic "Medical Record" revealed the record lacked a document titled "Functional Capacity Screen" (FCS). The electronic "Medical Record" further lacked a document titled "Negotiated Service Agreement" (NSA). Interview on 12/15/25 at approximately 01:45 PM with Operator A stated all resident records were kept in the facilities electronic "Medical Record" system, and she continued to confirm R1's electronic record lacked the documents titled FSC and NSA. Operator stated all resident records were to be scanned into the electronic "Medical Record" for each resident. Operator A further confirmed at the time of R1's admission to the facility a screening was not conducted for R1 that determined her functional capacity. The Operator failed to ensure prior to or at the time of R1's admission, a screening was conducted to determine R1's functional capacity.	S3080		
S3081 SS=D	26-41-201 (c) Functional Capacity Screen Reassessment (c) Designated facility staff shall conduct a screening to determine each resident ' s functional capacity according to the following requirements:	S3081		

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S3081	Continued From page 2 (1) At least once every 365 days; (2) following any significant change in condition as defined in K.A.R. 26-39-100; and (3) at least quarterly if the resident receives assistance with eating from a paid nutrition assistant. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-201 (c) (1) (2) The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure a screening that determined R2's functional capacity was performed at least every 365 days or with a change of condition. Findings included: - Record review for R2 revealed an admission date of 01/17/24 with diagnoses of other malaise, generalized anxiety disorder, anemia, other pulmonary embolism without acute cor pulmonale, insomnia, and muscle weakness. Review of R2's "Functional Capacity Screen" (FCS) dated 01/17/24 revealed R2 required supervision with bathing, and dressing. R2 was independent with toileting, transferring, walking/mobility, and eating. R2 required physical assistance with her medications and medical treatments. R2 was continent, her cognition was intact, and she was able to make herself understood and she understood others. R2 was at risk for falls and used a walker	S3081		

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S3081	Continued From page 3 mobility device. Review of R2's combined "Negotiated Service Agreement" (NSA) / "Health Service Plan" (HSP) dated 04/25/24 instructed facility staff to provide supervision with R2's bathing, dressing, and manage R2's medications and medical treatments. Under the section titled "Physical Therapy" a local home health agency was listed as providing physical therapy services twice weekly. Review of R2's electronic "Medical Record" under the "Progress Notes" tab lacked documentation any incidents, or other indications of illness or injury for R2. Review of R2's electronic "Medical Records" under the "Miscellaneous" tab revealed a document titled "Physician Appointment Form" signed by the medical provider on 09/17/25. In the section titled "Physicians instructions and notes" it the following was handwritten; "Start Hospice". Interview on 12/16/25 at approximately 12:45 PM with Operator A confirmed R2 had a change of condition and was admitted to hospice services on 09/18/25. Operator A further confirmed R2's required physical assistance with all activities of daily living and required staff physical assistance with mobility. The Operator failed to ensure a screening that determined R2's functional capacity was performed at least every 365 days or with a change of condition.	S3081		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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S3090	Continued From page 4	S3090		
S3090 SS=D	26-41-202 (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: K.A.R. 26-41-202 (c) The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure the development of an initial "Negotiated Service Agreement" (NSA) for R1at the time of admission to the facility. Findings included: - Record review for R1 revealed an admission date of 10/14/25. Review of R1's electronic "Medical Record" revealed the record lacked a document titled "Functional Capacity Screen" (FCS). The electronic "Medical Record" further lacked a document titled "Negotiated Service Agreement" (NSA). Interview on 12/15/25 at approximately 01:45 PM with Operator A confirmed R1's electronic record lacked the documents titled FSC and NSA. Operator continued to confirm all resident	S3090		

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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S3090	Continued From page 5 records were to be scanned into the electronic "Medical Record" for each resident. Operator A further confirmed at the time of R1's admission to the facility an initial NSA was not developed. The Operator failed to ensure the development of an initial NSA for R1 at the time of her admission to the facility.	S3090		
S3092 SS=D	26-41-202 (d) Negotiated Service Agreement Revisions (d) Each administrator or operator shall ensure the review and, if necessary, revision of each negotiated service agreement according to the following requirements:(1) At least once every 365 days; (2) following any significant change in condition, as defined in K.A.R. 26-39-100; (3) at least quarterly, if the resident receives assistance with eating from a paid nutrition assistant; and (4) if requested by the resident or the resident ' s legal representative, facility staff, the case manager, or, if agreed to by the resident or the resident ' s legal representative, the resident ' s family. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-202 (d) (1) (2) The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure a review and if necessary, revision of R2's "Negotiated Service Agreement"	S3092		

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

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S3092	Continued From page 6 (NSA) was performed at least every 365 days or with a change of condition. Findings included: - Record review for R2 revealed an admission date of 01/17/24 with diagnoses of other malaise, generalized anxiety disorder, anemia, other pulmonary embolism without acute cor pulmonale, insomnia, and muscle weakness. Review of R2's "Functional Capacity Screen" (FCS) dated 01/17/24 revealed R2 required supervision with bathing, and dressing. R2 was independent with toileting, transferring, walking/mobility, and eating. R2 required physical assistance with her medications and medical treatments. R2 was continent, her cognition was intact, and she was able to make herself understood and she understood others. R2 was at risk for falls and used a walker mobility device. Review of R2's combined "Negotiated Service Agreement" (NSA) / "Health Service Plan" (HSP) dated 04/25/24 instructed facility staff to provide supervision with R2's bathing, dressing, and manage R2's medications and medical treatments. Under the section titled "Physical Therapy" a local home health agency was listed as providing physical therapy services twice weekly. Review of R2's electronic "Medical Record" under the "Progress Notes" tab lacked documentation any incidents, or other indications of illness or injury for R2.	S3092		

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S3092	Continued From page 7 Review of R2's electronic "Medical Records" under the "Miscellaneous" tab revealed a document titled "Physician Appointment Form" signed by the medical provider on 09/17/25. In the section titled "Physicians instructions and notes" it the following was handwritten; "Start Hospice". Interview on 12/16/25 at approximately 12:45 PM with Operator A confirmed R2 had a change of condition and was admitted to hospice services on 09/18/25. Operator A further confirmed R2's required physical assistance with all activities of daily living and required staff physical assistance with mobility. The Operator failed to ensure a review and if necessary revision of R2's NSA was performed at least every 365 days or with a change of condition.	S3092		
S3186 SS=D	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.	S3186		

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S3186	Continued From page 8 This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-205 (b) The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure the "Negotiated Service Agreement" (NSA) for R3 reflected who was responsible for the administration of select medications. Findings included: - Record review for R3 revealed an admission date of 02/28/25 with diagnoses of bilateral primary osteoarthritis of the knees, hypothyroidism, cervicalgia, type two diabetes mellitus, and essential hypertension. Review of R3's "Functional Capacity Screen" (FCS) dated 02/28/25 revealed R3 was independent with bathing, dressing, toileting, transferring, walking/mobility, and eating. R3 required physical assistance with his medications and medical treatments. R3 was cognitively intact and was able to make himself understood and he understood others. R3 used no mobility device. Review of R3's combined NSA/" Health Service Plan" (HSP) dated 02/28/25, under the section titled "15. Medications" revealed "staff" were the "service provider" and "Resident may self-administer some medications as per doctor's orders, Staff responsible for all other medications". In the section titled "Comments" it	S3186		

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

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S3186	Continued From page 9 was handwritten that the nurse or "Certified Medication Aide" (CMA) were to store, administer, reorder medications ordered by the provider. The combined NSA/HSP lacked documentation of the medications R3 would self-administer. Review of the facility provided document titled "Self-Medications Test" dated 02/25/25 revealed in the section titled "Comments" section the following was handwritten: "Tresiba 1.5 milligrams / 0.5 milliliters inject one syringe subcutaneously every Sunday for Type II Diabetes Mellitus. Trulicity 1.5 milligrams/0.5 milliliters inject one syringe subcutaneously every Sunday for Type II Diabetes Mellitus". Interview on 12/16/15 at approximately 12:45 PM with Operator A and Licensed Nurse C confirmed R3's NSA lacked the identification of who was responsible for the administration of the Tresiba and Trulicity injections. The Operator failed to ensure the "Negotiated Service Agreement" (NSA) for R3 reflected who was responsible for the administration of select medications	S3186		
S3256 SS=D	26-41-105 (c) Resident Records Safeguards (c) Each administrator or operator shall ensure the safeguarding of resident records against the following:(1) Loss; (2) destruction; (3) fire; (4) theft; and (5) unauthorized use.	S3256		

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

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S3256	Continued From page 10	S3256		

This REQUIREMENT is not met as evidenced by:
K.A.R. 26-41-105 (c)(1) (5)

The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure the safeguarding of resident records for R3.

Findings included:

- Record review for R3 revealed an admission date of 02/28/25 with diagnoses of bilateral primary osteoarthritis of the knees, hypothyroidism, cervicalgia, type two diabetes mellitus, and essential hypertension.

Review of R3's electronic "Medical Record" on 12/15/25 revealed the record lacked documentation of the "Functional Capacity Screen" (FCS), "Negotiated Service Agreement" (NSA), immunizations, and "Progress Notes".

Interview on 12/16/25 at approximately 09:30 AM with Operator A confirmed all resident records were to be scanned into the facilities electronic "Medical Record" system. Operator A confirmed Regional Nurse B had R3's "paper chart" at a different facility in a neighboring town, and Regional Nurse B was "sending the paper chart."

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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S3256	Continued From page 11 On 12/16/25 Operator A provided the paper FCS, NSA, self administration of medication assessment, and a two step tuberculin skin test at 10:22 AM. The Operator failed to ensure the safeguarding of resident records for R3.	S3256		
S3261 SS=E	26-41-105 (f) (11) Resident Record 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: K.A.R. 26-41-105 (f) (11) The facility reported a census of 14 residents. The sample included 3 "Residents'" (R)'s. Based on record review and interview the Operator failed to ensure 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 for R2 when she experienced a change of condition. Findings included: - Record review for R2 revealed an admission date of 01/17/24 with diagnoses of other malaise, generalized anxiety disorder, anemia, other	S3261		

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	N063018	A. BUILDING: _____ B. WING _____	12/16/2025

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S3261	Continued From page 12	S3261		

pulmonary embolism without acute cor pulmonale, insomnia, and muscle weakness.

Review of R2's "Functional Capacity Screen" (FCS) dated 01/17/24 revealed R2 required supervision with bathing, and dressing. R2 was independent with toileting, transferring, walking/mobility, and eating. R2 required physical assistance with her medications and medical treatments. R2 was continent, her cognition was intact, and she was able to make herself understood and she understood others. R2 was at risk for falls and used a walker mobility device.

Review of R2's combined "Negotiated Service Agreement" (NSA) / "Health Service Plan" (HSP) dated 04/25/24 instructed facility staff to provide supervision with R2's bathing, dressing, and manage R2's medications and medical treatments. Under the section titled "Physical Therapy" a local home health agency was listed as providing physical therapy services twice weekly.

Review of R2's electronic "Medical Record" under the "Progress Notes" tab lacked documentation any incidents, or other indications of illness or injury for R2.

Review of R2's electronic "Medical Records" under the "Miscellaneous" tab revealed a document titled "Physician Appointment Form" signed by the medical provider on 09/17/25. In the section titled "Physicians instructions and notes" it the following was handwritten; "Start Hospice".

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S3261	Continued From page 13 Review of the facility provided document titled "Progress Note" from the local hospice agency revealed a note entered on 11/15/25 at 09:40 PM that revealed the hospice nurse made a visit to R2 due to facility staff reporting a possible change of condition for R2. "Facility staff reporting a possible change of in status. Patient was difficult to arouse per staff when they were trying to awaken her for medication administration. Patient did eventually arouse but was confused and agitated." Interview on 12/16/25 at approximately 12:45 PM with Operator A and Licensed Nurse C confirmed R2's electronic "Medical Record" lacked the documentation of R2 having symptoms of being difficult to arouse, confusion, and agitation. Operator A and Licensed Nurse C continued to confirm R2's electronic "Medical Record" lacked documentation of her change of condition when she admitted to hospice services on 09/18/25. The Operator failed to ensure 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 for R2 when she experienced a change of condition.	S3261		