

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N046078	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 01/08/2026
NAME OF PROVIDER OR SUPPLIER GARDEN VILLAS OF LENEXA		STREET ADDRESS, CITY, STATE, ZIP CODE 9705 MONROVIA LENEXA, KS 66215		
(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 197733, 195812, 195789, 195450, 192646, 191139, and 188007, for the above named facility conducted on 01/05/26, 01/06/26, 01/07/26, and 01/08/26.	S 000		
S3175 SS=D	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 by: K.A.R. 26-41-205 (a) The facility reported a census of 62 residents. The sample included 6 "Residents" (R)'s and 4 focused reviews. Based on observation,	S3175		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S3175	Continued From page 1 interview, and record review, the administrator failed to ensure the "Licensed Nurse" (LN) completed an assessment for R3 that determined he could safely and accurately without staff assistance self-administer selected medications. Findings Included: - Record review for R3 revealed an admission date of 10/29/25 with diagnoses of personal history of other malignant neoplasm of bronchus and lung, dementia, psychotic disturbance, mood disturbance and anxiety. Review of R3's "Functional Capacity Screen" (FCS) dated 12/08/25 revealed R3 required physical assistance with bathing. R3 was independent with bathing, dressing, toileting, transferring, walking and eating. R3 required supervision with management with his medications and medical treatments. R3 was occasionally incontinent and had impaired short-term memory, memory recall, and impaired decision making. R3 could usually make himself understood and he understood others. R3 was identified to have impaired decision making and used a walker mobility device. Review of R3's combined "Negotiated Service Agreement" (NSA)/ "Health Service Plan" (HSP) dated 12/08/25 instructed facility staff to provide a one staff assistance with bathing. Under the section titled "Medications" facility staff were instructed to provide all medication management. R3's combined NSA/HSP lacked identification of who was responsible for selected medications.	S3175		

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S3175	Continued From page 2 R3's "Medical Record" lacked documentation of an assessment completed by the LN that determined R3 could safely and accurately without staff assistance self-administer selected medications. Observation on 01/06/26 at approximately 11:00 AM of R3's apartment revealed next to the recliner on the southeast side of the recliner sat a small table. On the table were 1 bottle of Tums anti acid tablets, and 1 bottle of Aleve. Observation on 01/08/26 at approximately 10:00 AM of R3's apartment revealed on the top of the radio that sat in the southeast corner of the living area was a bottle of Advil and 1 bottle of Clairton, and in the basket on the small table next to the recliner was a tube of Voltaren gel. Interview on 01/06/26 with Licensed Nurse B confirmed R3's "Medical Record" lacked an assessment completed by the nurse that determined R3 could safely and accurately without staff assistance self-administer selected medications. The administrator failed to ensure the LN completed an assessment for R3 that determined he could safely and accurately without staff assistance self-administer selected medications.	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	S3186		

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S3186	Continued From page 3 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 62 residents. The sample included 6 "Residents" (R)'s and 4 focused reviews. Based on observation, interview, and record review, the administrator failed ensure the "Negotiated Service Agreement" (NSA) identified who was responsible for the administration of selected medications for R2 and R3. Findings Included: - Record review for R2 revealed an admission date of 02/01/2019 with diagnoses of edema, depression, pain, hypertension, constipation, dyspnea, other muscle spasm, and atrial fibrillation. Review of R2's "Functional Capacity Screen" (FCS) dated 09/05/25 revealed R2 required physical assistance with bathing, dressing, toileting, transferring, mobility and management of her medications and medical treatments. R2 was occasionally incontinent, and her cognition	S3186		

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S3186	Continued From page 4 was intact. R2 was able to make herself understood and she understood others. R2 was identified to have impaired vision and used a wheelchair mobility device. Review of R2's combined "Negotiated Service Agreement" (NSA)/"Health Service Plan" (HSP) dated 09/03/25 under the section titled "Medications" revealed the "Community to provide all medication management" and "Order and coordinate medications between family, healthcare providers and pharmacy". R2's combined NSA/HSP lacked identification of who was responsible for selected medications. Review of R2's electronic "Medication Administration Record" (MAR) revealed the following three orders; Obtain COVID 19 test as needed Obtain monthly weights Obtain monthly vitals The electronic MAR lacked documentation of medications and orders for R2. Review of R's medical record revealed a document titled "Daily Medications" as of 10/14/25 and included the following; Amiodarone HCL 200 "milligram" (mg) Baclofen 10 mg Atorvastatin 40 mg Levothyroxine 75 "micrograms" Omeprazole 40 mg Bupropion HCL 100 mg Losartan Potassium 100 mg	S3186		

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S3186	Continued From page 5 Potassium CL 20% (40 milliequivalent /15 milliliters) Triamcinolone Acetonide cream Hydralazine 50 mg Albuterol Sulfate inhalation solution Furosemide 20 mg Montelukast Sod 10 mg Tropium Chloride 60 mg LinZess 145 micrograms Cephalexin 250 mg Aspirin 81 mg Vitamin C 500 mg Allergy Relief 180 mg Vitamin D-3 50 micrograms Docusate sodium 50 mg Refresh Optive Calcium Citrate B12 Tylenol 500 m Interview on 01/08/25 at approximately 11:00 AM with "Licensed Nurse" (LN) B confirmed R2's family administers R2's medications to her. LN B further confirmed the NSA for R2 lacked identification of who was responsible for the management and administration of the selected medications R2's family was administering. Record review for R3 revealed an admission date of 10/29/25 with diagnoses of personal history of other malignant neoplasm of bronchus and lung, dementia, psychotic disturbance, mood disturbance and anxiety. Review of R3's "Functional Capacity Screen" (FCS) dated 12/08/25 revealed R3 required physical assistance with bathing. R3 was	S3186		

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S3186	Continued From page 6 independent with bathing, dressing, toileting, transferring, walking and eating. R3 required supervision with management with his medications and medical treatments. R3 was occasionally incontinent and had impaired short-term memory, memory recall, and impaired decision making. R3 could usually make himself understood and he understood others. R3 was identified to have impaired decision making and used a walker mobility device. Review of R3's combined "Negotiated Service Agreement" (NSA)/ "Health Service Plan" (HSP) dated 12/08/25 instructed facility staff to provide a one staff assistance with bathing. Under the section titled "Medications" facility staff were instructed to provide all medication management. R3's combined NSA/HSP lacked identification of who was responsible for selected medications. Observation on 01/06/26 at approximately 11:00 AM of R3's apartment revealed next to the recliner on the southeast side of the recliner sat a small table. On the table were 1 bottle of Tums anti acid tablets, and 1 bottle of Aleve. Observation on 01/08/26 at approximately 10:00 AM of R3's apartment revealed on the top of the radio that sat in the southeast corner of the living area was a bottle of Advil and 1 bottle of Clairton, and in the basket on the small table next to the recliner was a tube of Voltaren gel. Interview on 01/08/26 at approximately 11:00 AM with LN B confirmed the NSA/HSP for R3 lacked identification of who was responsible for selected medications.	S3186		

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S3186	Continued From page 7	S3186		
S3211 SS=F	26-41-205 (g) (3) OVER THE COUNTER DRUGS (3) A licensed nurse or medication aide may accept over-the-counter medication only in its original, unbroken manufacturer ' s package. A licensed pharmacist or licensed nurse shall place the full name of the resident on the package. If the original manufacturer ' s package of an over-the-counter medication contains a medication in a container, bottle, or tube that can be removed from the original package, the licensed pharmacist or a licensed nurse shall place the full name of the resident on both the original manufacturer ' s medication package and the medication container. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-205 (g) (3) The facility reported a census of 62 residents. Based on observation and interview the Administrator failed to ensure a "Licensed Nurse" (LN) or a Licensed Pharmacist placed the full name of the resident on the bottles of "Over the Counter" (OTC) medications. Findings included:	S3211		

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S3211	Continued From page 8 - Observation on 01/05/26 at approximately 02:00 PM of the medication cart located in the office of the secured specialty unit, revealed the following OTC's that lacked the full name of the resident: 1 box of Lidocaine Patches 1 box of Chloraseptic throat Lozenges 1 tube of Cortisone 10 cream 1 bottle of Equate Arthritis Pain relief gel 1 tube of Triamcinolone cream 1 bottle of asper cream Interview on 01/05/26 with LN B confirmed the OTC containers lacked the full name of the resident. The Administrator failed to ensure LN or a Licensed Pharmacist placed the full name of the resident on the containers of OTC medications.	S3211		
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 62 residents.	S3261		

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S3261	Continued From page 9 The sample included 6 "Residents" (R)'s and 4 focused reviews. Based on interview, and record review, the administrator failed ensure the 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 was documented in the resident records for R1 and R3. Findings Included: - Record review for R1 revealed an admission date of 06/19/23 with diagnoses of dementia, pain, major depressive disorder, type two diabetes mellitus, hypertension, and parkinsonism. Review of R1's "Functional Capacity Screen" (FCS) dated 06/03/25 revealed R1 required physical assistance with bathing, management of her medications and medical treatments. R1 was usually continent and had impaired short-term memory and memory recall. R1 was able to make herself understood and she understood others. R1 was identified at risk for falls and impaired vision. R1 used a walker mobility device. Review of R1's combined "Negotiated Service Agreement" (NSA)/"Health Service Plan" (HSP) dated 06/03/25 instructed facility staff to provide the following: 1 person stand by assistance with bathing, facility management of physician ordered medications, staff to provide cueing, reminders, and redirection. Review of R1's electronic "Medical Record" under the "Recent Progress Notes" tab revealed	S3261		

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S3261	Continued From page 10 the following entries; On 08/18/25 a pharmacist entry for a medication review with no recommendations identified. On 12/12/25 a pharmacist entry for a medication review with no recommendations identified. Review of R1's "Medical Record" under the "Orders" tab revealed a document titled "Physician's Verbal / Telephone Orders" dated 12/02/25. The order was for a "two view chest X ray" to rule out "pneumonia and chough /wheezing". R1's "Recent Progress Notes" lacked documentation of symptoms of wheezing and coughing", R1's "Recent Progress Notes" further lacked documentation of the results of the actions taken for the results of the chest Xray that was obtained. Interview with Administrator A and "Licensed Nurse" (LN) B confirmed R1's medical record lacked documentation of symptoms of wheezing and coughing prior to the order for the chest X ray. Record review for R3 revealed an admission date of 10/29/25 with diagnoses of personal history of other malignant neoplasm of bronchus and lung, dementia, psychotic disturbance, mood disturbance and anxiety. Review of R3's "Functional Capacity Screen" (FCS) dated 12/08/25 revealed R3 required physical assistance with bathing. R3 was	S3261		

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S3261	Continued From page 11 independent with bathing, dressing, toileting, transferring, walking and eating. R3 required supervision with management with his medications and medical treatments. R3 was occasionally incontinent and had impaired short-term memory, memory recall, and impaired decision making. R3 could usually make himself understood and he understood others. R3 was identified to have impaired decision making and used a walker mobility device. Review of R3's combined "Negotiated Service Agreement" (NSA)/ "Health Service Plan" (HSP) dated 12/08/25 instructed facility staff to provide a one staff assistance with bathing. Under the section titled "Medications" facility staff were instructed to provide all medication management. Review of R3's electronic "Medical Record" under the "Recent Progress Notes" revealed the following two entries: On 11/17/25 at 07:15 PM from the Registered Dietician that revealed R3 moved into the facility on 10/29/25 and he had a fair appetite. On 11/20/25 at 09:28 PM an note entered by the facility "Licensed Nurse" revealed that R1 had returned from the hospital after being sent to the local hospital for altered mental status. The electronic "Recent Progress Notes" lacked documentation of the symptom of altered mental status and the date of the altered mental status. Review of R3's "Medical Record" revealed a document titled "History and Physical" from the local hospital and the admission date was	S3261		

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S3261	Continued From page 12 11/18/25. The note revealed the following: "Patient presents to the emergency department for altered mental status. Patient was sent in by emergency medical services for altered mental status and possible alcohol intoxications. Patient has been drinking alcohol in his room". Patient reported to the provider that he had consumed "Vodka". Under the section titled "Diagnoses Assessment and Plan" the following was documented by the provider: the admitting diagnoses to the hospital was for altered mental status, toxic encephalopathy, alcohol intoxication and hypertension. R3 was admitted for "observation and alcohol detox". Review of R3's Medical Record" revealed under the "Nurse Note" tab the following entries: On 11/18/25 (no time documented) a note entered by "Certified Medication Aide" (CMA) C revealed on 11/18/25 she entered R3's room and noticed a half empty "bottles" of Vodka on the kitchen counter. CMA C wrote that she "Educated" R3 on using "Safety Measures with his drinking". The note lacked documentation of the nurse being notified. On 12/3/25 (no time documented) CMA C wrote that R3 was sent out to the local emergency room for altered mental status, "maybe due to alcohol use". R3 seemed confused and sick to his stomach. "The family and the medical doctor were notified". The note lacked documentation of the nurse being notified.	S3261		

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S3261	Continued From page 13 Interview on 01/08/26 at approximately 11:00 AM with Administrator A and LN B confirmed that the CMA documented in the "Nurse Notes" for R1, they further confirmed that they were not aware that R3 had been treated for alcohol and thought that he had been treated for a urinary tract infection. LN B confirmed the CMA did not notify her at the time of the incident. The administrator failed ensure the 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 was documented in the resident records for R1 and R3.	S3261		
S3320 SS=F	28-39-254 CONSTRUCTION (a) The assisted living facility or residential health care facility shall be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public. (b) All new construction, renovation, remodeling and changes in building use in existing buildings shall comply with building and fire codes, ordinances and regulations enforced by city, county, and state jurisdictions, including the state fire marshal. (c) New construction, modifications and equipment shall conform to the following codes and standards: (1) Title III of the Americans with disabilities act, 42 U.S.C. 12181, effective as of January 26,	S3320		

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S3320	Continued From page 14 1992; and (2) "Food Service Sanitation Manual," health, education, and welfare (HEW) publication no. FDA 78-2081, as in effect on July 1, 1981. This REQUIREMENT is not met as evidenced by: K.A.R. 28-39-254 (a) The facility reported a census of 62 residents. Based on observation and interview the Administrator failed to maintain the specialty unit to protect the health and safety of the residents located in the secured specialty unit of the facility. Findings included: - Observation on 01/05/26 at approximately 02:00 PM the Administrator put the code into the door for the secured specialty unit. In the common dining area on the southwest wall of the common dining area was a sink and cabinet. The door under the sink freely opened and there was a gallon container of liquid Emerald Glo Concentrated Pot and Pan cleaner. Interview on 01/05/26 at approximately 02:00 PM with Administrator A confirmed all chemicals in the specialty were to be secured. The Administrator failed to maintain the specialty unit to protect the health and safety of the residents located in the secured specialty unit of the facility.	S3320		

Kansas Department on Aging

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: N046078	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 01/08/2026
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