STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087275	A. BUILDING: _____ B. WING _____	03/26/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COZY COTTAGE SENIOR LIVING	2650 N GENTRY STREET WICHITA, KS 67220

(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 a Re-Licensure Survey with complaint investigation 193555 conducted on 03/25/26 & 03/26/26.	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: KAR 26-42-202(a)(1) The facility reported a census of seven residents (R). The sample included three residents. Based on interview and record review the operator failed to ensure designated staff developed a "Negotiated Service Agreement" based on the resident's "Functional Capacity Screen" and service needs that identified how three (R3, R4, R5) of three residents who were dependent on	S5105		

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S5105	Continued From page 1 another person's assistance to exit the facility. Findings included: - Review of R3's medical record revealed she moved into the facility on 07/27/24 with diagnoses of Vascular dementia and chronic pain. R3's "Functional Capacity Screen" (FCS) dated 07/31/25 revealed she was unable to participate in transfers and walk/mobility and used a mechanical lift and wheelchair. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R3's NSA/HCSP failed to include services sufficient to meet R3's needs related to her total dependency on another person's assistance to exit the building. Interview on 03/25/26 at 03:06 PM Certified Medication Aide B reported staff had to transfer R3 with a full body lift, and pushed her in the wheelchair because she cannot propel herself. Interview on 03/26/26 at 12:28 PM Operator/Nurse Practitioner A confirmed R3 was dependent on staff for mobility and the NSA/HCSP did not include how R3 exited the facility. The operator failed to ensure designated staff completed R3's NSA/HCSP to include how she	S5105		

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S5105	Continued From page 2 exited the facility. - Review of R4's record revealed she moved into the facility on 06/27/25 with a diagnosis of diabetes type II. R4's "Functional Capacity Screen" dated 12/28/25 identified she required physical assistance of staff for transfers and walk/mobility and had impaired cognition. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R4's NSA/HCSP with a report date of 07/02/26 failed to include services sufficient to meet R3's needs related to her total dependency on another person's assistance to exit the building. Interview on 03/25/26 at 03:10 PM Certified Medication Aide B reported the resident used a wheelchair and had a bad arm so we have to push her wheelchair. Interview on 03/26/26 at 12:28 PM Operator/Nurse Practitioner A confirmed R3 was dependent on staff for mobility and the NSA/HCSP did not include how R3 exited the facility. The operator failed to ensure designated staff completed R4's NSA/HCSP to include how she exited the facility.	S5105		

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S5105	Continued From page 3 - Review of R5's record revealed he moved into the facility on 09/23/24 with a diagnosis of Parkinson's disease. R5's "Functional Capacity Screen" dated 10/29/25 revealed he was unable to participate in transfers and needed physical assistance of staff with walk/mobility. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R5's NSA/HCSP identified R5 used a wheelchair and required another person to push form place to place. The NSA/HCSP failed to identify how R5 would exit the facility. Interview on 03/25/26 at 03:09 PM Certified Medication Aide B reported the resident needed a two persons assist using a sit-to-stand lift for transfers and used a wheelchair for mobility. Interview on 03/26/26 at 12:28 PM Operator/Nurse Practitioner A confirmed R3 was dependent on staff for mobility and the NSA/HCSP did not include how R3 exited the facility. The operator failed to ensure designated staff completed R5's NSA/HCSP to include how he exited the facility.	S5105		
S5116 SS=E	26-42-202 (d) NSA revisions (d) Each administrator or operator shall ensure	S5116		

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S5116	Continued From page 4 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, 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: KAR 26-42-202(d)(2) The facility reported a census of seven residents(R). The sample included three residents. Based on observation, interview, and record review the operator failed to ensure designated staff reviewed and revised, if necessary, the "Negotiated Service Agreement" for two (R3 and R4) of three sampled residents following a significant change in condition as defined in KAR 26-39-100. Findings Included: - Review of R3's medical record revealed she moved into the facility on 07/27/24 with diagnoses of Vascular dementia and chronic pain. R3's "Functional Capacity Screen" (FCS) dated	S5116		

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S5116	Continued From page 5 07/31/25 revealed she needed physical assistance with bathing and dressing and could not participate in toileting, transfers, mobility or management of her medications. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R3's NSA/HCSP identified staff provided physical assistance with all activities of daily living and administered her medications and medical treatments. The NSA/HCSP did not include any Home Health (HH) services. Interview with a local HH company on 03/26/26 at 08:48 AM revealed they provided R3 Skilled Nursing, Physical Therapy (PT), and Occupational Therapy (OT) services from 10/14/25 to 12/3/25. R3's record lacked revision of her NSA/HCSP to identify she received outside services from a local HH company. Interview on 03/26/26 at 11:14 AM Operator/Nurse Practitioner A confirmed she had not reviewed and revised R3's NSA/HCSP when she started and stopped PT, OT, and skilled nursing services from HH. Review of the facilities "Negotiated Service Agreement" (NSA) policy dated 05/15/24 identified the NSA will be developed on admission and should be reviewed at least annually and following any significant change.	S5116		

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S5116	Continued From page 6 The operator failed to ensure designated staff reviewed and revised R3's NSA/HCSP when she had a significant change in status related to Skilled therapy and nursing services. - Review of R4's record revealed she moved into the facility on 06/27/25 with a diagnosis of diabetes type II. R4's "Functional Capacity Screen" dated 12/28/25 identified she required physical assistance of staff for all activities of daily living except for eating. She was unable to manage her medications or medical treatments and had impaired cognition. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R4's NSA/HCSP with a report date of 07/02/26 identified staff provided assistance with activities of daily living and received services through a local Home Health (HH) agency but did not identify what services she received. R4's NSA/HCSP dated 12/28/25 identified staff provided assistance with activities of daily living, administered her medications and medical treatments. It identified she received Home Health (HH) services through a local company but did not identify what services she received. R4's record did not include a review/revision of the NSA/HCSP to identify when R4 started and	S5116		

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S5116	Continued From page 7 stopped Skilled Nursing, Speech Therapy, Physical Therapy, and Occupational Therapy through the HH company. Interview on 03/26/26 at 10:30 AM Operator/ Nurse Practitioner A reported she reviewed the NSA?HCSP annually and revise it whenever they have a change in their "Functional Capacity screen . She confirmed she had not reviewed/revised it when she started or stopped services with HH. Review of the facilities "Negotiated Service Agreement" (NSA) policy dated 05/15/24 identified the NSA will be developed on admission and should be reviewed at least annually and following any significant change. The operator failed to ensure designated staff reviewed and revised R3's NSA/HCSP when she had a significant change in status related to Skilled therapy and nursing services.	S5116		
S5251 SS=E	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)	S5251		

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S5251	Continued From page 8 The facility reported a census of seven residents (R). The sample included three residents. Based on observation, interview and record review the operator failed to ensure the record contained documentation of all incidents, symptoms, and other indications of illness or injury including the time and date of occurrence, action taken, and results of the action for two (R3, R4, R5) of three sampled residents. Findings included: - Review of R3's medical record revealed she moved into the facility on 07/27/24 with diagnoses of Vascular dementia and chronic pain. R3's "Functional Capacity Screen" (FCS) dated 07/31/25 revealed she required physical assistance of staff with bathing and dressing, was unable to participate in toileting, transfers and walk/mobility and used a mechanical lift and wheelchair. It identified that she was unable to manage her medications and medical treatments. Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP). R3's NSA/HCSP identified staff would provide assistance with activities of daily living and would administer medications and medical treatments. Review of R3's Nurse observation notes revealed the following: 01/16/25 - woke up having hallucination.	S5251		

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S5251	Continued From page 9 The record lacked documentation for follow-up on her hallucinations. 01/21/25 - obtaining stool sample The record lacked documentation of symptoms the resident had indicating the need to obtain a stool specimen. 02/26/25 - seen by medical provider with new order to discontinue Sertraline (antidepressant) start Fluoxetine (antidepressant) for anxiety. The record lacked documentation related to results of changing her antidepressant medications. 04/03/2/5 - new order to discontinue Lactaid with meals. The record lacked documentation of the results of discounting her Lactaid. 05/19/25 - medical provider increased Fluoxetine from 20 milligrams (mg) to 40 mg daily and Decrease Mirtazapine to 15mg at bedtime only. The record lacked documentation of follow up related to medication changes. 06/10/25 - urine analysis returned and new order to start Ciprofloxacin daily for seven days for urinary tract infection. The record lacked documentation of symptoms related to need to obtain urine analysis and lacked follow up related to antibiotic use. 06/17/25 - refused to take a shower and stated she was in too much pain from her leg to be in the shower chair. The record lacked follow up related to her pain. 07/21/25 - staff reported a small wound to residents' coccyx and new order for staff to continue calmoseptine (barrier ointment) and repositioning - The record lacked documentation including the measurement, description, results of action taken.	S5251		

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S5251	Continued From page 10 08/12/25 - Doxycycline ordered by medical provider due to infection of ingrown right great toenail 08/20/25 - Mupirocin 2% ointment - apply small amt to affected area for ingrown toenail. The record lacked documentation related to results of treatment for ingrown toenail. 10/9/25 -Hyperkalemia per lab and new order to go to local hospital for evaluation. 10/10/25 - Admitted to Intensive Care Unit for critical elevated potassium levels. The record lacked documentation of her returning from the hospital. 10/21/25 - X-ray results - with no acute bone changes noted. The record lacked documentation of symptoms as to why the x-ray was obtained. 01/24/26 - resident sounds like she is becoming congested and has a cough and loose watery stools. The record lacked documentation staff notified the Nurse or medical provider. 01/30/26 - resident tested positive for COVID-19, needs to quarantine in her room until fever free for 24 hours and symptoms improving. She must wear a mask in the common area for 5 days after improvement in symptoms. The record lacked follow up documentation. Interview on 03/26/26 at 06:55 AM Certified Nurse Aide C reported staff check and change R3 for incontinence, reposition her through out the day, help with all her activities of daily living, and administer all her medications. Interview on 03/26/26 at 11:10 AM Operator/Nurse Practitioner A confirmed the Nurse had not documented symptoms, follow up	S5251		

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S5251	Continued From page 11	S5251		

on medication changes such as antibiotics because the medical provider comes every two weeks and follows up in their notes.

The operator failed to ensure designated staff documented in R3's record, all symptoms related to illness, treatment initiated, and results of the treatment.

- Review of R4's record revealed she moved into the facility on 06/27/25 with a diagnosis of diabetes type II.

R4's "Functional Capacity Screen" dated 12/28/25 identified she required physical assistance of staff for activities of daily living, had impaired cognition, and was unable to participate in management of her medications and medical treatments.

Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP).

R4's NSA/HCSP with a report date of 07/02/26 identified staff would assist with activities of daily living, administer her medications and medical treatments and provide cueing and reminders for impaired cognition.

Review of R4's nursing observation notes revealed the following:
07/01/25 - Resident lethargic this morning, rolled out of bed onto the floor while physical therapy tried to get her up. new order due to lethargy change Xanax scheduled twice a day to three

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S5251	Continued From page 12 times a day as needed. Start Rocephin injection daily x 3 days for suspected urinary tract infection. The record lacked documentation of obtaining the urine analysis. 07/02/25 -Levofloxacin po daily time three days and start Haldol (antipsychotic) for aggression twice a day and change Xanax from twice a day to three times a day for anxiety. The record lacked documentation of aggressive behaviors prior to 07/02/25 to require starting Haldol and follow up as to results of medication changes. 07/21/25 - recently treated for urinary tract infection and having increased urinating. New order to start Gemtesa for overactive bladder. The record lacked documentation of follow up of new medication for increased urinating. 09/19/25 - New Order to increase Desvenlafaxine (antidepressant) for depression The record lacked documentation of symptoms to increase antidepressants. 01/22/26 - Start Cefdinir every 12 hours times seven days for urinary tract infection. The record lacked documentation related to symptoms related to starting an antibiotic or follow up results of treatment. 02/20/26 - New order for Tramadol twice a day scheduled, and one time as needed. The record lacked documentation related symptoms to increase scheduled Tramadol or follow up as to results. 03/04/26 - ne orders to increase Pristiq (antidepressant) to 100 mg and give in am - The record lacked documentation of symptoms related to need to increase Pristiq. 03/20/26 - fell attempting to leave her bed and had no visible injuries.	S5251		

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S5251	Continued From page 13 The record lacked documentation of nurse or physician notification, nurse assessment, and follow post fall. Interview on 03/25/26 at 03:10 PM Certified Medication Aide B reported staff assisted R4 with activities of daily living and administered her medications. Interview on 03/26/26 at 10:33 AM Operator/Nurse Practitioner A reported she would expect to have significant events documented. She confirmed the record did not include nursing documentation related to symptoms and follow up of new medication orders. The operator failed to ensure designated staff documented in R4's record, all symptoms related to illness, treatment initiated, and results of the treatment. - Review of R5's record revealed he moved into the facility on 09/23/24 with a diagnosis of Parkinson's disease. R5's "Functional Capacity Screen" dated 10/29/25 revealed he needed physical assistance with all activities of daily living and was unable to participate in management of medications and medical treatments. . Interview on 03/25/26 at 01:33 PM Operator/Nurse Practitioner A reported the "Negotiated Service Agreement" and the "Health Care Service Plan" are one document (NSA/HCSP).	S5251		

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S5251	Continued From page 14 R5's NSA/HCSP identified staff provided physical assistance with all activities of daily living and administered his medications and medical treatments. Review of R5's nursing observation notes revealed the following: 02/18/25 - resident reported increased pain to medical provider and new orders to increase Percocet to four times per day. The record lacked follow up as to results from increasing medication. 04/23/25 - new order to change liquids to nectar thick due to resident choking on regular water. The record lacked follow up documentation on how resident tolerated nectar thick liquids. 07/15/25 - new order for levofloxacin daily for five days due to acute confusion. The record lacked follow up if antibiotic helped with confusion. 09/22/25 - skin assessment revealed no concerns. 11/20/25 - skin observed and not improving with use of calmoseptine. The record lacked documentation of impaired skin condition. 11/23/25 - The residents bottom with bleeding and complaining about pain. The record lacked documentation if nurse or medical provider were notified. 01/16/26 - resident sounds like he may be getting sick, nurse notified. The record lacked documentation if nurse assessed resident or medical provider notified. 01/21/26 - resident possibly aspirated on breakfast. The record lacked documentation if staff notified the nurse or any action taken.	S5251		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B087275	A. BUILDING: _____ B. WING _____	03/26/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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S5251	Continued From page 15 03/09/26 - New orders for Augmentin (antibiotic) every 12 hours times seven days. The record lacked documentation as to why antibiotics started or results of treatment. Interview on 03/26/26 at 06:56 AM Certified Nurse Aide (CNA) C reported the resident requires total assistance with care. She reported that his bottom sometimes gets red and raw so staff will leave him in bed and reposition him until it clears up. CNA C also confirmed that R5 received a mechanically altered diet with thickened liquids. Interview on 03/26/26 at 12:12 PM Operator/Nurse Practitioner reported she thought the medical provider documentation was sufficient and confirmed she had not documented symptoms, treatment, and follow up in R5's record. The operator failed to ensure designated staff documented all indications of illness, symptoms, action taken, and results of action in R5's record.	S5251		