Kansas Department on Aging

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | N039005 | A. BUILDING: _____ B. WING _____ | 10/26/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| HERITAGE ESTATES ASSISTED LIVING | 1212 HICKORY STREET HARPER, KS 67058 |

| (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 |
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| S 000 | INITIAL COMMENTS<br><br>The following citations represent the findings of a Health Licensure Resurvey conducted on 10/22/26.<br><br>The facility reported a census of 9 residents. The sample included 3 residents and 3 newly hired employees. | S 000 | | |
| S3248 SS=F | 26-41-102 (d) Staff Qualifications Employee Records<br><br>(d) The employee records and agency staff records shall contain the following documentation:<br>(1) Evidence of licensure, registration, certification, or a certificate of successful completion of a training course for each employee performing a function that requires specialized education or training;<br>(2) supporting documentation for criminal background checks of facility staff and contract staff, excluding any staff licensed or registered by a state agency, pursuant to K.S.A. 39-970 and amendments thereto;<br>(3) supporting documentation from the Kansas nurse aide registry that the individual does not have a finding of having abused, neglected, or exploited a resident in an adult care home; and<br>(4) supporting documentation that the individual does not have a finding of having abused, neglected, or exploited any resident in an adult care home, from the nurse aide registry in each state in which the individual has been known to have worked as a certified nurse aide. | S3248 | | |

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

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| S3248 | Continued From page 1<br>This REQUIREMENT is not met as evidenced by:<br>K.A.R. 26-41-102 (d) (2) Staff Qualifications<br><br>Based on interview and record review the facility failed to ensure each new employee had supporting documentation for a criminal background checks of facility staff pursuant to K.S.A. 39-970 and amendments thereto for newly hired Certified Medication Aide (CMA) A and Certified Nurse Aides (CNA)'s B and C.<br><br>On 10/22/26 the surveyor reviewed CMA A's personnel record and revealed she began her employment on 08/24/26. The record lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto.<br><br>On 10/22/26 the surveyor reviewed CNA B's personnel record and revealed she began her employment on 09/14/26. The record lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto.<br><br>On 10/22/26 the surveyor reviewed CNA C's personnel record and revealed she began her employment on 01/17/26. The record lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto.<br><br>On 10/22/26 at approximately 02:10 PM Operator D confirmed the personnel records for CMA A and CNA's B and C lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto.<br><br>The facility failed to ensure the personnel records for CMA A and CNA's B and C lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto. | S3248 | | |

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| S3310 SS=F | 26-41-207 (b) (5-6) (c) Infection Control Policies<br><br>(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;<br>(6) providing orientation to new employees and employee in-service education at least annually on the control of infections in a health care setting; and<br>(c) Each administrator or operator shall ensure the facility ' s compliance with the department ' s tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105<br><br>This REQUIREMENT is not met as evidenced by:<br>K.A.R. 26-41-207 (c) Infection Control<br><br>Based on interview and record review the facility failed to ensure compliance with the department's Tuberculosis guidelines for adult care homes adopted by reference in K.A.R. 26-39-105 for newly hired Certified Medication Aide (CMA) A and Certified Nurse Aides (CNA)'s B and C.<br><br>On 10/22/26 the surveyor reviewed CMA A's personnel record and revealed she began her employment on 08/24/26. The record contained a document titled "TB Skin Test Questionnaire and Consent" which revealed the first step was read on 12/31/25 and the second step was read on 01/07/26.<br><br>The TB two step skin test was greater than six | S3310 | | |

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| S3310 | Continued From page 3<br>months old when CMA A began her employment.<br><br>On 10/22/26 the surveyor reviewed CNA B's personnel record and revealed she began her employment on 09/14/26. The record contained a document titled "TB Skin Test Consent Form" which revealed the first step of the required TB skin test was read on 09/11/26. The record lacked documentation of a second step TB skin test being performed within one to three weeks after the first step read negative.<br><br>On 10/22/26 the surveyor reviewed CNA C's personnel record and revealed she began her employment on 01/17/26. The record contained a document titled "TB Skin Test Consent Form" which revealed the first step of the required TB skin test was read on 01/09/26. The record lacked documentation of a second step TB skin test being performed within one to three weeks after the first step read negative.<br><br>On 10/22/26 at approximately 02:10 PM Operator D confirmed the personnel records for CMA A and CNA's B and C lacked documentation of a background check pursuant to K.S.A. 39-970 and amendments thereto.<br><br>The facility failed to ensure the personnel records for CMA A's required two step TB skin test was greater then six months old at the time she was hired and Operator D continued to confirm and CNA's B and C personnel records lacked documentation of the required second step TB skin test being performed within one to three weeks after the first step read negative.<br><br>The facility failed to ensure compliance with the department's Tuberculosis guidelines for adult care homes adopted by reference in K.A.R. | S3310 | | |

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| S3310 | Continued From page 4<br>26-39-105 for newly hired CMA A and CNA's B and C. | S3310 | | |