

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 175327	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/26/2024
NAME OF PROVIDER OR SUPPLIER Winfield Senior Living Community		STREET ADDRESS, CITY, STATE, ZIP CODE 1320 Wheat Rd Winfield, KS 67156	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40801</p> <p>The facility reported a census of 40 residents, with three residents sampled. Based on observation, interview, and record review the facility failed to revise Resident (R)1's care plan to reflect interventions related to R1's personal hygiene.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Review of the Physician Order dated 06/20/24 revealed Resident (R) 1 had the following diagnoses: dementia without behavioral disturbance (progressive mental disorder characterized by failing memory, confusion) and prolapse bladder (a condition that occurs when the muscles and ligament that support the bladder weaken and causing the bladder to bulge into the vaginal canal). <p>Review of the Annual Minimum Data Set (MDS) dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 11, indicating moderately impaired cognition. R1 was independent with Activities of Daily Living (ADLs).</p> <p>Review of the Quarterly Minimum Data Set, dated dated [DATE] revealed R1 had a (BIMS) score of 08, which indicated moderately impaired cognition. The MDS noted R1 refused bathing.</p> <p>The Care Plan dated 06/20/24 revealed R1 required one person assistance with ADLs due to decreased mobility and dementia. The care plan further noted staff were to ask R1 if she wanted a bath, daily. The care plan documented R1 would refuse (bathing) and the staff were to notify the charge nurse and noted the staff must approach three times. The care plan lacked revision to include notification of the resident's family member when R1 refused to bathe.</p> <p>Review of the Bathing Sheets from 06/30/24 to 07/23/24 indicated R1 did not receive a bath for 24 days.</p> <p>The Physician Order dated 08/14/24 revealed an order for R1 to have a bath daily.</p> <p>Review of the Nurses Notes on 08/17/24, 08/18/24, 08/21/24, 08/23/24, 08/25/24 R1 refused her bath, and the facility did not contact R1's family member.</p> <p>Review of the Nurses Notes from 06/02/24 to 08/23/24 indicated R1 did refuse bathing, the notes lacked evidence of notification to R1's family member.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an observation on 08/26/24 at 10:30 AM, R1 sat in a recliner in the commons area. R1 then ambulated to her room, using her front wheeled walker, without difficulty. R1 clothes looked clean, and no foul odors were observed.</p> <p>Interview with R1's family member on 08/26/24 at 12:06 PM revealed the staff were to give R1 a daily bath, and if R1 refused to take a bath the facility staff were to contact me.</p> <p>During an interview on 08/26/24 at 12:40 PM, revealed Certified Nurse Aide (CNA) D revealed the staff did offer a bath daily. CNA D said R1 preferred to have her baths at night before bedtime but with them now on day shift, R1 refuses the bath. If R1's family member was in the facility, she will help to encourage her to take a bath. CNA D said she did know the staff did not follow the protocol of documenting like they are suppose too when a resident refuses a bath</p> <p>During an interview on 08/26/24 at 02:00 PM, Licensed Nurse (LN) C revealed R1 liked her bath before going to bed, but staff moved her shower to the day shift because the facility had a bath aide on the day shift. LN C did not know the staff were to contact R1's family member if R1 refused to take a bath.</p> <p>During an interview on 08/26/24 at 02:50 PM Administrative Nurse B knew the nurses were to contact R1's family member if R1 refused a bath.</p> <p>The facility's policy Care Plans, Comprehensive Person-Centered dated March 2023 revealed a comprehensive, person-centered care plan that includes measurable objectives and timetables to meet the resident's physical, psychosocial and functional needs is developed and implemented for each resident. Assessments of the residents are ongoing and care plans are revised as information about the residents and the residents condition change.</p> <p>The facility failed to revise R1's care plan to reflect interventions related to R1's personal hygiene.</p>		

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<p>F 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40801</p> <p>The facility reported a census of 40 residents, with three residents sampled. Based on observation, interview, and record review the facility failed to ensure staff provided Resident (R)1 the necessary bathing services to maintain good grooming and personal hygiene.</p> <p>Findings included:</p> <ul style="list-style-type: none"> - Review of the Physician Order dated 06/20/24 revealed Resident (R)1 had the following diagnoses: dementia without behavioral disturbance (progressive mental disorder characterized by failing memory, confusion) and prolapse bladder (a condition that occurs when the muscles and ligament that support the bladder weaken and causing the bladder to bulge into the vaginal canal). <p>Review of the Annual Minimum Data Set (MDS) dated [DATE] revealed a Brief Interview for Mental Status (BIMS) score of 11, indicating moderately impaired cognition. R1 was independent with Activities of Daily Living (ADLs).</p> <p>Review of the Quarterly Minimum Data Set, dated dated dated [DATE] revealed R1 had a (BIMS) score of 08, which indicated moderately impaired cognition. The MDS noted R1 refused bathing.</p> <p>The Care Plan dated 06/20/24 revealed R1 required one person assistance with ADLs due to decreased mobility and dementia. The care plan further noted staff were to ask R1 if she wanted a bath, daily. The care plan documented R1 would refuse (bathing) and the staff were to notify the charge nurse and noted the staff must approach three times.</p> <p>Review of the Bathing Sheets from 06/30/24 to 07/23/24 indicated R1 did not receive a bath for 24 days.</p> <p>The Physician Order dated 08/14/24 revealed an order for R1 to have a bath daily.</p> <p>Review of the Nurses Notes on 08/17/24, 08/18/24, 08/21/24, 08/23/24, 08/25/24 R1 refused her bath, and the facility did not contact R1's family member.</p> <p>Review of the Nurses Notes from 06/02/24 to 08/23/24 indicated R1 did refuse bathing, the notes lacked evidence of notification to R1's family member.</p> <p>During an observation on 08/26/24 at 10:30 AM, R1 sat in a recliner in the commons area. R1 then ambulated to her room, using her front wheeled walker, without difficulty. R1 clothes looked clean and no foul odors were observed.</p> <p>Interview with R1's family member on 08/26/24 at 12:06 PM revealed the staff were to give R1 a daily bath, and if R1 refused to take a bath the facility staff were to contact me.</p> <p>(continued on next page)</p>		

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