

State Licensed Only

# Survey, Certification, and Credentialing



# KANSAS

# Introduction

## State Licensed Only Survey Team!

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# Introduction

[https://sos.ks.gov/publications/pubs\\_kar\\_Articles.aspx?KAR=26](https://sos.ks.gov/publications/pubs_kar_Articles.aspx?KAR=26)

K.A.R 26-41-105 (f) (11) Resident Records; documentation of all incidents, symptoms, and other indications of illness or injury including the date and time of the occurrence, actions taken and results of the action.



# Home Plus Scenarios

## Case Study 1: Alcohol Use and Intoxication in a Private Room

Resident: Thomas Reilly

Age: 71

Health Conditions: Alcohol use disorder, hypertension, peripheral neuropathy, gastritis

Cognitive Status: Cognitively intact

Ambulation: Ambulates independently with an unsteady gait at times

### Scenario:

Mr. Reilly keeps alcohol in his private room and frequently drinks to the point of visible intoxication in the evenings. Staff have observed slurred speech, poor balance, and unsafe ambulation in the hallway after drinking. He insists that he is in his own room and has the right to drink as he chooses. Other residents have expressed concern when he appears intoxicated in shared areas, and staff worry about fall risk and overall safety.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

- KAR 26-42-202. 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; (services to reduce the risk of inappropriate behaviors related to alcohol consumption.)
- KAR 26-39-103 Resident rights in adult care homes. (a) Protection and promotion of resident rights. Each administrator or operator shall ensure the protection and promotion of the rights of each resident as set forth in this regulation. Each resident shall have a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the adult care home.

# Regulatory Compliance

Include in the development of the NSA the resident preferences and collaborate with the resident on ways to safely consume alcohol and define it in the NSA Documentation of each episode of intoxication.  
Update the NSA/CP for interventions to deal with alcohol behavior;  
Notification of family of episodes;  
Negotiated risk agreement;  
Resident rights and responsibilities. Identify where the alcohol is being obtained. In house rehab needed?

THE RESIDENT HAS THE RIGHT TO MAKE POOR CHOICES

# Home Plus #2

## Case Study 2: Overnight Staffing and Serious Fall on a Campus Setting

Resident: Eleanor Watkins

Age: 85

Health Conditions: Severe osteoarthritis, obesity, congestive heart failure, history of falls

Cognitive Status: Cognitively intact

Ambulation: Requires a two-person assist with a gait belt for transfers

### Scenario:

The Home Plus is located on a larger campus that includes a Skilled Nursing Facility. The Home Plus staffs one employee overnight and relies on a float staff member from the SNF if additional help is needed. On night shift, Ms. Watkins attempted to walk to the restroom without assistance. The sole overnight staff member was assisting another resident at the time. Ms. Watkins fell, sustaining a hip fracture that required hospital transfer and surgery.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

If this is a documented symptom of his illness then;

KAR 26-42-104. Disaster and emergency preparedness. (a) The administrator or operator of each home plus shall ensure the provision of a sufficient number of staff members to take residents who would require assistance in an emergency or disaster to a secure location.

# Regulatory Compliance

- Facility policy for staff-
  - If a facility has a resident in the house that requires 2-person assistance you must have 2 alert and available qualified staff 24 hours a day.

# Home Plus Scenarios #3

## Case Study 3: Smoking in a Resident Room

Resident: Carl Donahue

Age: 77

Health Conditions: Chronic obstructive pulmonary disease (COPD), coronary artery disease, nicotine dependence

Cognitive Status: Cognitively intact

Ambulation: Ambulates independently

### Scenario:

Staff discover Mr. Donahue smoking cigarettes in his private room despite the Home Plus being a non-smoking building. Cigarette butts are found in a trash can near oxygen tubing used by another resident earlier in the day. Mr. Donahue states he has smoked his entire life and refuses to go outside, especially during cold weather.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

KAR 26-42-202. 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; ( to reduce the risk of fire related to smoking)

KAR 26-39-103 (a) ...each resident shall have a right to a dignified existence, self – determination..,

KAR 26-39-102 (d) (2) (C) Admission, Transfer, and Discharge...the safety of other individuals in the adult care home is endangered...a physician shall document the rationale for transfer or discharge in the resident's clinical record if the transfer is necessary because the health or safety of other individuals in the adult care home is endangered.

# Regulatory Compliance

- Document in nurses notes when the resident is found smoking in his room.
- Negotiated Risk Agreement for smoking.
- Give the resident options: other forms of nicotine (gum/patches) Document;
- Risk to other residents
- Get the medical provider involved

# Home Plus Scenarios #4

## Case Study 4: Outing to the Casino and Oxygen Management

Resident: Rosa Martinez

Age: 82

Health Conditions: COPD, chronic hypoxia, hypertension

Cognitive Status: Cognitively intact

Ambulation: Ambulates with a walker

### Scenario:

The Home Plus plans an outing to a local casino. The CMA assigned to the shift calls in sick, and two CNAs transport the residents instead. Ms. Martinez uses continuous oxygen and requires assistance switching from her concentrator to portable oxygen tanks. During the outing, staff realize they are unsure who is responsible for managing oxygen equipment and monitoring oxygen levels outside the home.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

26-42-204. Health care services. (a) The administrator or operator in each home plus shall ensure that a licensed nurse provides or coordinates the provision of necessary health care services that meet the needs of each resident and are in accordance with the functional capacity screening and the negotiated service agreement.

(d) The negotiated service agreement shall contain a description of the health care services to be provided and the name of the licensed nurse responsible for the implementation and supervision of the plan.

(e) A licensed nurse may delegate nursing procedures not included in the nurse aide or medication aide curriculums to nurse aides or medication aides, respectively, under the Kansas nurse practice act, K.S.A. 65-1124 and amendments thereto.

# Regulatory Compliance

Document on the NSA who the resident can go out with and what staff can assist with oxygen.  
Delegate a CNA to switch the oxygen tanks and use pulse oximeter

# Home Plus Scenario #5

## Case Study 5: Fall With Skin Tear and No Nurse On-Site

Resident: Joyce Hammond

Age: 89

Health Conditions: Fragile skin, osteoporosis, anemia, hypertension

Cognitive Status: Cognitively intact

Ambulation: Ambulates with a walker

### Scenario:

Ms. Hammond fell in the hallway during the evening shift and sustained a large skin tear to her forearm. There is no licensed nurse physically present in the Home Plus. The CNA immediately provided basic first aid within scope and called the on-call nurse to report the fall and injury. The nurse provided instructions by phone.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

KAR 26-42-202. 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;

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Resident Records; documentation of all incidents, symptoms, and other indications of illness or injury including the date and time of the occurrence, actions taken and results of the action.

# Regulatory Compliance

Complete a nurse assessment via phone and a thorough assessment when the nurse arrives.

Did the resident hit her head? This resident would need an onsite assessment by the Nurse.

Complete a root cause analysis for the fall.

Immediate interventions need to be placed on the NSA/CP

Needs fall interventions after root cause analysis for the fall, placed on the NSA/CP (addendum)

Document by nurse all facts, VS, size of tear, assessment for other injury etc.

# Home Plus Scenarios #6

## Case Study 6: Liberalized Dining and Food Temperature Documentation

Resident Example: Linda Cho

Age: 73

Health Conditions: Type 2 diabetes, mild arthritis

Cognitive Status: Cognitively intact

Ambulation: Ambulates independently

### Scenario:

The Home Plus practices liberalized dining. Of the 12 residents, breakfast is typically served at 4–6 different times based on resident preference. Residents may order items from a short-order menu, and meals are prepared individually throughout the morning. Staff question whether they must temp and document each meal immediately prior to serving it, given the staggered service model.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

KAR 26-42-206 Dietary services. (a) The administrator or operator of each home plus shall ensure the provision or coordination of dietary services to residents as identified in each resident's negotiated service agreement. e) Food shall be prepared using safe methods that conserve the nutritive value, flavor, and appearance and shall be served at the proper temperature.

KAR 26-39-103 Resident rights in adult care homes. (a) Protection and promotion of resident rights. Each administrator or operator shall ensure the protection and promotion of the rights of each resident as set forth in this regulation. Each resident shall have a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the adult care home.

KAR 26-42-202. 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.

# Regulatory Compliance

Follow Food Safety Guide 2005

<https://www.dietaryguidelines.gov/sites/default/files/2019-05/2005%20DG%20for%20Americans.pdf>

Document resident preference in mealtime and collaborate with the resident to ensure meals are served hot.

# Home Plus Scenarios #7

## Case Study 7: Brief Loss of Visual Contact at Exit Door

Resident: Walter Benson

Age: 80

Health Conditions: Mild cognitive impairment, hypertension

Cognitive Status: Cognitive impairment, no dementia diagnosis

Ambulation: Ambulates independently

### Scenario:

An aide observes Mr. Benson walking out the front door of the Home Plus, into 32-degree weather without his coat. The aide immediately follows him but is approximately 20 yards behind. When the door closes, the aide loses visual contact for 1–2 seconds before exiting the building. The aide resumes visual contact immediately outside and remains with Mr. Benson the entire time. The operator later reviews camera footage showing the sequence of events. Mr. Benson was safely escorted back inside and has no injuries noted.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

26-42-202. 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.

# Regulatory Compliance

Document in nurses notes

Root Cause with intervention- ensure there was not a mechanical malfunction.

Add any intervention to the NSA

# Home Plus Scenarios #8

## Case Study 8: Physical Altercation Due to Misunderstanding

### Residents:

Henry Kowalski, age 84

Conditions: Alzheimer's disease, arthritis

Ambulation: Ambulates with a walker

Martha Green, age 79

Conditions: Vascular dementia, hypertension

Ambulation: Ambulates independently

### Scenario:

Mr. Kowalski became agitated when he believed Ms. Green had taken his chair in the living room. Ms. Green, confused, thought the chair was hers and refused to move. The interaction escalated, and both residents pushed each other before staff intervened. Neither resident sustained serious injury, but both appeared frightened afterward.

### Question:

What documentation or steps should the Home Plus take to ensure regulatory compliance in this scenario?

# Regulatory Compliance

KAR 26-42-101. Administration. (a) Administrator and operator responsibilities. The administrator or operator of each home plus ("home") shall ensure that the home is operated in a manner so that each resident receives care and services in accordance with each resident's functional capacity screening and negotiated service agreement.

(3) Each allegation of abuse, neglect, or exploitation shall be reported to the administrator or operator of the home as soon as staff is aware of the allegation and to the department within 24 hours. The administrator or operator shall ensure that all of the following requirements are met:

(A) An investigation shall be started when the administrator or operator, or the designee, receives notification of an alleged violation.

(B) Immediate measures shall be taken to prevent further potential abuse, neglect, or exploitation while the investigation is in progress.

(C) Each alleged violation shall be thoroughly investigated within five working days of the initial report. Results of the investigation shall be reported to the administrator or operator.

(D) Appropriate corrective action shall be taken if the alleged violation is verified.

# Regulatory Compliance

**Document incident in nurses notes for both residents**

**Root Cause regarding why the altercation happened.**

**What intervention was put in place to prevent it from happening again.**

**Report to Physician and resident DPOA**

**Document any interventions on the NSA**

# Thank You!

Questions?

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