

A NOTE FROM DAWNE

It's hard to believe we are in the last quarter of 2023. The holidays are so close that I can almost smell the pumpkin pie! As 2023 winds down I encourage you all to take some time to reflect on how far you have come this year with your career, your family and yourself. Take time to breath, reflect and relax a little. None of us came through the PHE unscathed however we all came thru stronger and more knowledgeable. Thank you for all you do for your residents and staff on a daily basis, but please take time do pat yourself on the back! We have heard it at several trainings the last year but "remember your why". Have a wonderful holiday season and we will see you again in 2024!



RETENTION OF RECORDS

According to 26-41-105 [Kansas Secretary of State - KAR Regulations \(ks.gov\)](#) each operator will maintain resident records in accordance with acceptable standards of practice.



The facility must maintain discharged resident records for at least five years. If a facility is going thru Change of Ownership, it would be best practice to have a process in place to retain possession of records during the transfer. If you have any questions, please feel free to reach out to Dawne Altis @ dawne.altis@ks.gov

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- 11.Zero Deficiency Celebration



Power Strip Safety

By: Shawn Alexander, KSFM

As technology progresses, many of us find that there just are not enough outlets to manage all of our devices and appliances, especially in older buildings. Homes and workplaces alike often do not have an adequate number of electrical outlets. In addition, the outlets that exist are not always located in the most convenient place for our use.

Thankfully, power strips are here to save the day against this monumental adversary. However, it is important to take safety precautions when using power strips, especially with the holidays and colder weather right around the corner.

A crucial step to using power strips is to have knowledge of their amperage rating. This can be found on the tag located on the power cord or on the underside of the strip. It is important to note the amperage rating of the power strip and the devices that are being plugged into it. If you are not careful, the power strip will become overloaded, which can cause the power strip to overheat and may catch fire.

With cooler temperatures coming, many turn to using space heaters for warmth. An important rule to follow is plugging space heaters directly into a wall outlet. Power strips are not designed to handle the energy load of a space heater. This will likely cause the power strip to overheat, creating an increased risk of fire.

In addition, the following are best practices to stay safe when using power strips.

- Power strips are meant for indoor use only.
- Power strips should be plugged into a grounded wall outlet. Do not plug a power strip into an existing surge protector, power strip or extension cord.
- Power strip cords should not be passed through doors, walls, floors, or ceilings.
- There should only be one power strip or surge protector plugged into a double wall outlet.
- Only use power strips for low-voltage electronics.
- Keep all power strips and surge protectors uncovered so that air around it may circulate freely.
- Check power strips and surge protectors regularly to ensure they are not damaged.

While technology has produced some great products that make our lives easier, it is also very important to understand the safety risks. Following these tips can reduce the risk of fire due to the incorrect use of power strips.



State Operations Manual Appendix PP SOM, Rev. 211, 02-03-23, (F689, Accidents) :

Electrical Safety - Any electrical device, whether it needs to be plugged into an electric outlet, can become hazardous to the residents through improper use or improper maintenance. Electrical equipment such as electrical cords can become tripping hazards. Halogen lamps or heat lamps can cause burns or fires if not properly installed away from combustibles in the resident environment. The Life Safety Code prohibits the use of portable electrical space heaters in resident areas.

Power strips may not be used as a substitute for adequate electrical outlets in a facility. Power strips may be used for a computer, monitor, and printer. Power strips are not designed to be used with medical devices in patient care areas. Precautions needed if power strips are used include installing internal ground fault and over-current protection devices; preventing cords from becoming tripping hazards; and using power strips that are adequate for the number and types of devices used. Overload on any circuit can potentially cause overheating and fire. The use of ground fault circuit interruption (GFCIs) may be required in locations near water sources to prevent electrocution of staff or residents.

Community Partnership

On October 12, 2023, Kansas Department for Aging and Disability Services LTSS Commissioner Michele Heydon and Director of NF and ACH Programs Sheri Jurad traveled to Manhattan, KS to receive the Friend of the College Award on behalf of the KDADS NF Program Team for their collaboration with the PEAK program. The Friend of the College Award recognizes significant, ongoing support of the College of Health and Human Sciences. Award winners have demonstrated significant leadership on behalf of the college at the community, state and/or federal level.

KDADS has been a partner with the K-State Center on Aging for more than 10 years through contract work, which started with the Center providing educational materials to the organization about culture change in nursing homes. In 2012, KDADS contracted the Center to administer its Medicaid pay-for-performance program, PEAK, which is still housed in the Center today. This relationship has provided the opportunity for the Center to be seen as experts on person-centered care and large-scale change on both the statewide and national levels and has allowed them to impact the quality of life for residents in nursing homes across the country.

From their nominator, “Creating community partnerships that are mutually beneficial is incredibly important and, at times, challenging. The Kansas Department of Aging and Disability has partnered with the Center on Aging since 2008 to improve the quality of life for Kansas residents living in nursing homes through the PEAK program. We want to thank them for their dedication to Kansas older adults and for being committed to a strong, effective partnership.”



Friend of the College Award 2023





A MESSAGE FROM THE KANSAS STATE LONG-TERM CARE OMBUDSMAN, CAMILLE RUSSELL



Hello All,

The work continues to be challenging & rewarding for everyone striving to serve residents in long-term care. I would like to share some information to be helpful in that service.

Contact information for Kansas Regional Long-Term Care Ombudsman by county can be found at

<https://ombudsman.ks.gov/>

Remember... Long-Term Care Ombudsman are *resident directed* advocates.

<https://ltcombudsman.org/uploads/files/library/long-term-care-ombudsman-program-what-you-must-know.pdf>

Notices required under regulation to the State Long-Term Care Ombudsman should be sent timely to the Kansas state office email LTCO@KS.GOV. (Example: Transfer/Discharge Notices)

<https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-483/subpart-B/section-483.15>

A helpful planning person centered planning resource for Healthcare Crisis and other Emergency Planning preparedness can be found at:

https://ombudsman.ks.gov/docs/default-source/default-document-library/kansas-long-term-care-ombudsman-healthcare-crisis-passport-revised-9-30-22.pdf?sfvrsn=86dc3007_4

A nationally recognized **Resident Council Handbook** to help residents and staff develop and support effective resident councils can be found at:

https://ombudsman.ks.gov/docs/default-source/default-document-library/kansas-residents-council-handbook.pdf?sfvrsn=3a323f07_0

Thank you for your collaboration to promote and protect the residents right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the adult care home. K.A.R. 26-39-103

Camille





IDR PANEL MEMBERS NEEDED

If you would be willing to volunteer your time to serve on the informal dispute resolution (IDR) panel please submit your interest and contact information to Patricia Purdon and she will add you to her list of potential members. Each IDR lasts approximately 1 hour and may be on TEAMS or in person. All findings and discussions are confidential to the panel members and are not published or expressed to KDADS or the facility involved in the resolution process.

CMP INFORMATION

CMP Wi-Fi Questionnaire

CMS has asked that certified nursing facilities that do not have facility wide Wi-Fi to fill out a questionnaire. This will help inform CMS of potential funding to support this. Please reach out to **Rebecca.miller@ks.gov** for the questionnaire. You can also visit: <https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/civil-money-penalty-reinvestment-program> to find the application.

CMP Announces Grant Opportunity for Visitation Air Flow and Quality Improvement

As of Feb. 2, 2022, certified nursing facilities may apply for up to an additional \$3,000 of CMP Nursing Home Visitation Aid Grant funds for the purchase of indoor portable fans and/or indoor portable air cleaners with high-efficiency particulate air (HEPA, H-13, or -14) filters to increase or improve air quality for resident in-person visitation. Please reach out to KDADS.CMPRP@ks.gov for information or visit: <https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/civil-money-penalty-reinvestment-program>.

CMPRP program is open.

CMS has released new guidelines for funding to help certified facilities with potential programs. These funds are reinvested to support activities that benefit nursing home residents and that protect or improve their quality of care or quality of life. Have a project in mind? Please reach out to KDADS.CMPRP@ks.gov or visit <https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-general-information/civil-money-penalty-reinvestment-program>.

SCC CONTACTS

Lacey Hunter, SCC Commissioner:

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Patricia Purdon, SCC License, Certification and Enforcement Manager:

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Evelyn Lacey, South District Regional Manager:

* Evelyn.lacey@ks.gov

Lori Mouak, RAI Coordinator:

* Lori.mouak@ks.gov

Jessica Patterson, State Training Coordinator:

* Jessica.patterson@ks.gov

John Easley, Physical Environmental Specialist:

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Mary Tegtmeier, State Licensed Only QI Coordinator:

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RESOURCE SPOTLIGHT



According to the Center Of Excellence for Behavioral Health in Nursing Facilities (COE-NF) website the center was “established by the Substance Abuse and Mental Health Services Administration (SAMHSA), in partnership with the Centers for Medicare and Medicaid Services (CMS), the COE-NF offers Certified Medicare and Medicaid Nursing Facility Staff a centralized resource hub with easy access to trainings, technical assistance and additional resources, at no cost.”

While the COE-NF was created for facilities who are part of the Medicare and Medicaid networks, and offers specific training for those settings, the website also has training available on demand for the public and other provider types. Some of the on-demand training types include:

- * CMS Behavioral Health Strategy
- * Understanding Bipolar Disorder
- * Mindfulness Moment
- * Older Adult Mental Health Video Training Series

We encourage you to take a minute to explore the COE-NF website and utilize this valuable resource as they have evidence based trainings for every member of your team.

“THE CENTER OF EXCELLENCE FOR BEHAVIORAL HEALTH IN NURSING FACILITIES (COE-NF)”

[Home - COE-NF
\(nursinghomebehavioralhealth.org\)](http://nursinghomebehavioralhealth.org)



MDS MINUTE

It has been a few weeks since CMS released the updated MDS item sets and RAI Manual v1.18.11 with a significant amount of changes. We are aware of the time and effort it takes to implement these kinds of changes within your facilities and appreciate the time and dedication that goes into an undertaking like this. I wanted to touch base with you all about a few questions I have received in multiples over the last few weeks.

1. Will Kansas require an Optional State Assessment?

- ◆ At this time Kansas is not requiring an optional state assessment.

2. What is the lookback period for some of the 10-01-23 MDS questions, if the RAI Manual does not specify?

- ◆ According to the RAI Manual the lookback period for all items is 7 days unless another time frame is indicated.

3. Is this item missing because of a software glitch?

- ◆ If you look up the specific item set (NC, NQ, etc.) on the CMS website you will be able to see if CMS intended for that specific question to be made available on your specified item set. If you note that the question/item should have been made available, please reach out to your software vendor to ensure all required areas are captured.

4. Where do I find MDS updates?

- ◆ For the most up-to-date MDS information visit: [Minimum Data Set \(MDS\) 3.0 Resident Assessment Instrument \(RAI\) Manual | CMS](#)

5. Do you have any information about ICD-10 coding or upcoming trainings?

- ◆ KCHA is hosting a “Virtual ICD-10 Coding Workshop” on 12/04/23 from 8:30 AM to 4:00 PM. For details and other educational opportunities see: [Education Calendar | Kansas Health Care Association \(khca.org\)](#)

Thank you to all of the awesome MDS Coordinators we have across the State of Kansas! Your hard work and dedication to quality care do not go unnoticed. Please e-mail any topics you would like to see, questions you have, or concerns related to coding of the MDS to lori.mouak@ks.gov. If you have questions related to case mix or Medicaid related questions please e-mail Trescia.power@ks.gov.

It's almost time for Fall Joint Provider Training!

If you haven't already registered you can find the link at: [KACE - Education Events Calendar \(kaceks.org\)](#)

Topeka—November 15, 2023 from 9:00 AM to 4:00 PM at Topeka Hotel (1717 SW Topeka Blvd., Topeka, KS 66612).

Wichita—November 16, 2023 from 9:00 AM to 5:00 PM at Wichita Holiday Inn East (549 South Rock Road Wichita, KS 67207).



EDUCATIONAL OPPORTUNITY

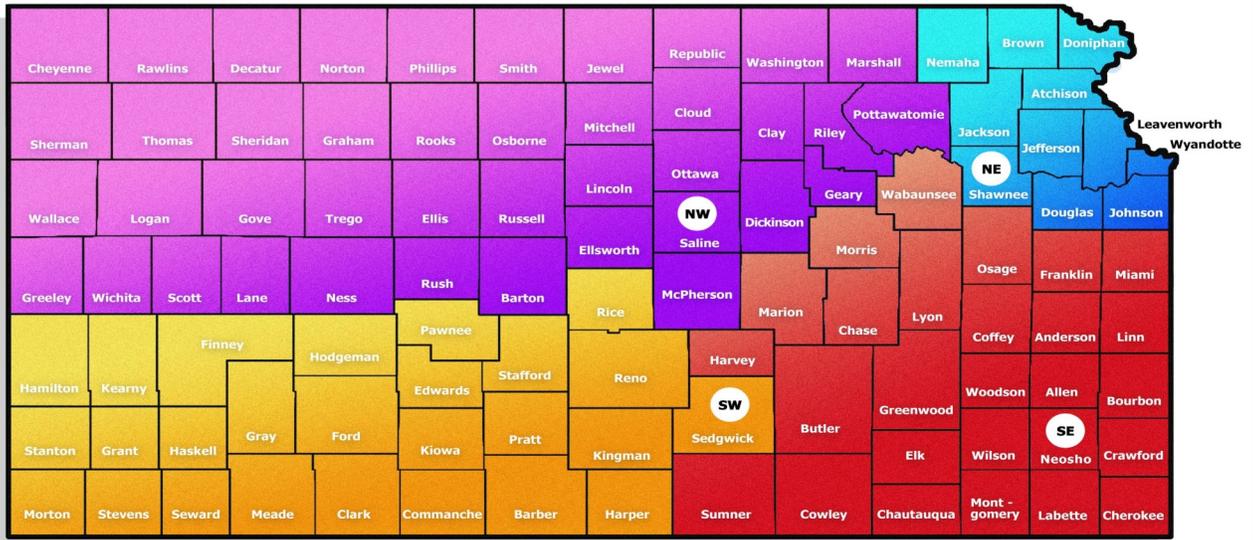
If you would like to learn more about the survey process, regulations, Life Safety, and other topics applicable to provider type the Quality Safety and Education Portal (QSEP) is available for free to all provider types and the public.

According to the QSEP website “The Quality, Safety & Education Portal (QSEP) provides the full curriculum of surveyor training and guidance on health care facility regulations. QSEP is an online platform that empowers learners to lead and manage their own learning in order to master the content. All training is available on-demand on a top-notch self-service portal. 24/7 access means you have the freedom to learn what you want, where you want, when you want.”





Survey, Certification and Credentialing Commission District Offices



In 2022 the Long Term Care division of the Survey, Certification and Credentialing Commission consolidated to two districts. The Northwest and Northeast Districts are overseen by Felicia Majewski and the Southwest and Southeast Districts are overseen by Evelyn Lacey.

RESOURCES

The most recent State Operations Manual, Appendix PP (Book of Regulations) and survey related documents can be found at:

<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes>



YOUR FEEDBACK IS IMPORTANT TO US

Please let us know if you have any ideas or suggestions for topics you would like to see addressed in future editions of the Sunflower Connection. We are always looking for feedback so please don't hesitate to reach out to:

Lori Mouak: Lori.mouak@kdads.ks.gov

Jessica Patterson: Jessica.patterson@kdads.ks.gov



MOST CITED DEFICIENCIES LTC

10/8/2023
1:50:22PM

HEALTH RESURVEY DEFICIENCY DATA July 1 - September 30, 2023 TOP 10 G+

0689	Free of Accident Hazards/Supervision/Devices	5	33.3%
0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	3	20.0%
0684	Quality of Care	2	13.3%
0692	Nutrition/Hydration Status Maintenance	2	13.3%
0678	Cardio-Pulmonary Resuscitation (CPR)	1	6.7%
0740	Behavioral Health Services	1	6.7%
0742	Treatment/Srvcs Mental/Psychosocial Concerns	1	6.7%

RESOURCES

Visit our website at <https://kdads.ks.gov>

- Adult Care Home Licensure and Certification Information.
- Adult Care Home Directory.
- Surveys, Reports, Regulations and Statutes.
- Health Occupations and Credentialing Information:
 - Criminal Record Checks.
 - Board of Adult Care Home Administrators.
 - Continuing Education
- Behavioral Health Policies and Regulations .
- Latest COVID-19 Guidance.
- Event Calendar.

10/8/2023
3:46:39PM

HEALTH RESURVEY DEFICIENCY DATA January 1 - September 30, 2023 TOP 10

TAG			
0689	Free of Accident Hazards/Supervision/Devices	94	6.8%
0657	Care Plan Timing and Revision	69	5.0%
0812	Food Procurement,Store/Prepare/Serve-Sanitary	67	4.8%
0880	Infection Prevention & Control	67	4.8%
0758	Free from Unnec Psychotropic Meds/PRN Use	60	4.3%
0756	Drug Regimen Review, Report Irregular, Act On	55	4.0%
0550	Resident Rights/Exercise of Rights	46	3.3%
0757	Drug Regimen is Free from Unnecessary Drugs	46	3.3%
0690	Bowel/Bladder Incontinence, Catheter, UTI	43	3.1%
0677	ADL Care Provided for Dependent Residents	42	3.0%

MOST CITED DEFICIENCIES STATE LICENSED

10/8/2023
3:54:39PM

HEALTH RESURVEY DEFICIENCY DATA January 1 - September 30, 2023

TAG			
3310	Infection Control Policies	55	6.3%
3085	Negotiated Service Agreement	47	5.3%
3211	OVER THE COUNTER DRUGS	44	5.0%
3280	Disaster and Emergency Preparedness	40	4.5%
5105	Negotiated Service Agreement	35	4.0%
3261	Resident Record Documentation of Incidents	28	3.2%
3092	Negotiated Service Agreement Revisions	26	3.0%
3299	Facility Food Storage	23	2.6%
3171	Health Care Services Standards of Practice	21	2.4%
3248	Staff Qualifications Employee Records	21	2.4%

REMINDER

Go to <https://www.kdads.ks.gov> then click on web applications and go to the log in page to create a 1st time user account or log in using your pre established credentials to verify your information is correct. You are responsible for updating your facility page with your current Administrator and/or Operator. Also ensure your e-mail address is up to date and active.

Congratulations



HEALTH RESURVEY DEFICIENCY DATA January 1 - September 30, 2023 ZERO DEFICIENCY ALF/RHCF/HPs

10/8/2023

3:54:23PM

NAME	Count	City	MCARE ID	FACID	EXIT DATE
ABBA AGAPE CARE HOMES LLC	1	WICHITA	B087196	3/23/23	STHP
ABILENE PLACE SOUTH	2	ABILENE	N021008	8/30/23	ALF
ADDINGTON PLACE OF PRAIRIE VILLAGE	3	PRAIRIE VILLAGE	N046086	7/10/23	ALF
AMANI HOME PLUS	4	WICHITA	B087231	9/21/23	STHP
BRANDON WOODS AT ALVAMAR	5	LAWRENCE	N023009A	4/27/23	ALF
BROOKDALE SHAWNEE	6	SHAWNEE	N046053	6/26/23	STRHCF
BROOKDALE TOPEKA	7	TOPEKA	N089040	5/16/23	STRHCF
CARE HAVEN HOMES - BROADMOOR	8	OVERLAND PARK	B046050	7/24/23	STHP
CARE HAVEN HOMES - WYCKLOW	9	OVERLAND PARK	B046061	7/27/23	STHP
CHISHOLM PLACE	10	WICHITA	N087071	6/13/23	STRHCF
CLEARWATER VILLAGE	11	CLEARWATER	N087053	4/18/23	ALF
COMFORT CARE HOMES INC #147	12	WICHITA	B087100	5/18/23	STHP
CORNERSTONE ASSISTED LIVING INC	13	WICHITA	N087041	8/16/23	ALF
CREDO MEMORY CARE OF CHANUTE	14	CHANUTE	B067003	9/18/23	STHP
CREDO SENIOR LIVING OF INDEPENDENCE	15	INDEPENDENCE	N063018	3/8/23	ALF
DIGNITY CARE HOME	16	SALINA	N085008	1/30/23	STRHCF
DIVINE CARE HOMES LLC #2	17	WICHITA	B087261	8/3/23	STHP
FAIRVIEW ESTATES RETIREMENT COMMUNITY, INC	18	COLBY	N097003	1/3/23	ALF
GLEN CARR HOUSE	19	DERBY	N087073	7/17/23	STRHCF
GOSHEN HOME CARE INC	20	OVERLAND PARK	B046036	4/5/23	STHP
GOSHEN HOME CARE JOY HOUSE	21	OVERLAND PARK	B046056	1/31/23	STHP
GRAN VILLAS COFFEYVILLE ON 8TH	22	COFFEYVILLE	N063016	1/26/23	ALF
GRAN VILLAS COFFEYVILLE ON TYLER	23	COFFEYVILLE	N063015	1/23/23	ALF
GUEST HOME ESTATES II	24	CHANUTE	N067009	6/28/23	STRHCF
GUEST HOME ESTATES II	25	CHANUTE	N067009	3/7/23	STRHCF
GUEST HOME ESTATES VI	26	FORT SCOTT	N006001	5/22/23	STRHCF
HEART TO HEART HOME PLUS	27	POMONA	B030008	4/26/23	STHP
HEARTLAND MEADOWS, LLC	28	IOLA	B001001	5/3/23	STHP
HOME OF THE FLINT HILLS 3	29	SILVER LAKE	N089066	2/20/23	STRHCF
HOME OF THE FLINT HILLS LLC	30	SAINT GEORGE	N075008	2/21/23	STRHCF
HOMESTEAD OF EUDORA	31	EUDORA	N023024	6/15/23	ALF
HOMESTEAD OF WELLINGTON	32	WELLINGTON	N096009	7/3/23	ALF
KEEPSAKE KOTTAGE #2	33	WICHITA	B087226	5/15/23	STHP
KEEPSAKE KOTTAGE #5	34	WICHITA	B087260	7/13/23	STHP
LAMAR COURT ASSISTED LIVING COMMUNITY	35	OVERLAND PARK	N046051	7/20/23	ALF
LEGEND AT CAPITAL RIDGE	36	TOPEKA	N089045	8/29/23	ALF
MADÉL'S HOUSE	37	LAWRENCE	B023021	3/30/23	STHP
MAGGIE'S PLACE AT COLONIAL VILLAGE BUILDING 1	38	OVERLAND PARK	B046076	5/25/23	STHP
MAGGIE'S PLACE AT COLONIAL VILLAGE BUILDING 2	39	OVERLAND PARK	B046077	5/18/23	STHP
MAGGIE'S PLACE AT COLONIAL VILLAGE BUILDING 4	40	OVERLAND PARK	B046079	5/4/23	STHP

CONTINUED ON PG . 9

SUNFLOWER SEEDS

316 CERTIFIED NURSING FACILITIES (NFS) IN KANSAS

3 ADULT DAY CARES

2 BOARDING CARE HOMES

128 ASSISTED LIVING FACILITIES

176 HOME PLUS FACILITIES

49 RESIDENTIAL HEALTH CARE FACILITIES

101 NFS WITH AN ATTACHED STATE LICENSED ONLY (SLO) FACILITY

AVERAGE OF 62 BEDS PER HOME IN KANSAS.

6 STATE LICENSED STAFF AND 2 VACANCIES

30 CERTIFIED STAFF AND 17 VACANCIES

HEALTH RESURVEY DEFICIENCY DATA January 1 - September 30, 2023

ZERO DEFICIENCY FACILITIES

10/8/2023

3:46:35PM

NAME	City	MCARE ID	FACID	EXIT DATE
ANDERSON COUNTY HOSPITAL LTCU	GARNETT	17E577	H002101	4/5/23
BETHESDA HOME	GOESSEL	175403	N057006	6/7/23
CRESTVIEW NURSING & RESIDENTIAL LIVING	SENECA	175426	N066003	4/19/23
NORTH POINT SKILLED NURSING CENTER	PAOLA	175276	N061001	2/2/23
SCHOWALTER VILLA	HESSTON	175386	N040006	1/11/23
SUNPORCH OF DODGE CITY	DODGE CITY	175207	N029002	2/23/23

ZERO DEFICIENCY ALF/RHCF/HP'S CONTINUED....

MAGGIE'S PLACE AT COLONIAL VILLAGE BUILDING 5	41	OVERLAND PARK	B046080	4/20/23	STHP
MARQUIS PLACE	42	CONCORDIA	N015008	8/15/23	ALF
MEADOWBROOK SENIOR LIVING	43	PRAIRIE VILLAGE	N046106	7/26/23	ALF
MIDLAND CARE RESIDENTIAL CENTER	44	TOPEKA	N089043	8/31/23	STRHCF
MORNINGSIDE PLACE	45	OVERLAND PARK	N046083	6/14/23	STRHCF
MORNINGSIDE PLACE	46	OVERLAND PARK	N046083	8/1/23	STRHCF
MORNINGSTAR CARE HOMES OF BALDWIN CITY, LLC	47	BALDWIN CITY	B023014	5/4/23	STHP
OAKVIEW ESTATES	48	FRONTENAC	N019014	1/31/23	STRHCF
OPA'S HOUSE	49	LAWRENCE	B023019	3/30/23	STHP
PRECIOUS GEMS HOMES AT POLO DR	50	WICHITA	B087116	9/25/23	STHP
REFLECTION LIVING MAIZE COURT 2	51	WICHITA	B087188	8/2/23	STHP
REFLECTION LIVING MAIZE COURT 3	52	WICHITA	B087194	8/16/23	STHP
REFLECTION LIVING SHAWNEE BAUM HOUSE	53	SHAWNEE	B046072	4/12/23	STHP
REFLECTION LIVING, LLC	54	WICHITA	B087146	6/27/23	STHP
SENIORCARE HOMES NEW CANAAN HOUSE	55	OVERLAND PARK	B046081	7/25/23	STHP
SUNRISE ASSISTED LIVING OF LEAWOOD	56	LEAWOOD	N046072	9/14/23	ALF
SUNRISE ASSISTED LIVING OF LENEXA	57	LENEXA	N046071	9/21/23	ALF
SUNRISE ASSISTED LIVING OF OVERLAND PARK	58	OVERLAND PARK	N046074	8/22/23	ALF
TAMMY THE PRO, LLC	59	TOPEKA	B089073	3/21/23	STHP
THE AUTUMN PLACE	60	COLUMBUS	N011007	6/27/23	STRHCF
THE COTTAGES SENIOR CARE LIVING OF GARDEN CITY	61	GARDEN CITY	B028002	5/9/23	STHP
THE HOMESTEAD OF AUBURN	62	AUBURN	N089042	1/11/23	ALF
THE HOMESTEAD OF LEAWOOD	63	LEAWOOD	N046039	4/4/23	ALF
THE HOMESTEAD OF LENEXA	64	LENEXA	N046043	7/11/23	ALF
THE HOMESTEAD OF WICHITA	65	WICHITA	N087042	1/5/23	ALF
THE PIPER ALF	66	KANSAS CITY	N105018	3/13/23	ALF
THE PRAIRIE FARMSTEAD EAST	67	OVERLAND	B046064	8/2/23	STHP
THE PRAIRIE FARMSTEAD WEST	68	OVERLAND	B046065	8/3/23	STHP
THE W PLACE AT MEADOWLARK	69	KINGMAN	B048002	5/11/23	STHP
TWIN OAKS ASSISTED LIVING	70	LANSING	N052007	8/29/23	ALF
ULTRA CARE HOME PLUS	71	WICHITA	B087220	7/13/23	STHP
ULTRA CARE HOME PLUS	72	WICHITA	B087220	8/2/23	STHP
ULTRA CARE HOME PLUS 4	73	WICHITA	B087162	7/12/23	STHP
ULTRA CARE HOME PLUS LLC 3	74	WICHITA	B087254	2/16/23	STHP
VINTAGE PARK AT GARDNER LLC	75	GARDNER	N046055	1/10/23	ALF
VINTAGE PARK AT STANLEY LLC	76	OVERLAND PARK	N046069	7/25/23	ALF
VINTAGE PARK AT WATERFRONT LLC	77	WICHITA	N087039	6/29/23	ALF
WELLSPRINGS OF WICHITA #2	78	WICHITA	B087236	4/12/23	STHP
% ZERO DEF. SURVEYS:		30.2%			



DEPARTMENT OF HEALTH & HUMAN SERVICES
(cms.gov) Access to Records by Surveyors: During the entrance conference, surveyors will verify with the facility the process they will follow in order to have unrestricted access to the medical record. Impeding the survey process by unnecessarily delaying or restricting access to the medical records may lead to termination from Medicare participation.