

SUNFLOWER CONNECTION

Table of Contents

- New KDADS Secretary 1**
- SCCC Contacts 2 – 3**
- PEAK Open Enrollment 4**
- Annual CNA/HHA Employment Verification ... 4**
- Electronic Monitoring 5**
- Web Applications; KOTA, Facilities 6**
- Ask John 6**
- Kansas State Fire Marshal 7 – 8**
- Changes to CFR 483.15 8**
- 2018 Deficiency Free Surveys 9 – 11**

New Acting KDADS Director Appointed



Governor-elect Laura Kelly announced Laura Howard as the Interim Secretary of the Department for Aging and Disabilities Services (KDADS). Howard will also serve the same role

at the Department for Children and Families (DCF).

“Laura Howard is the perfect expert to lead DCF and KDADS at this challenging time,” said Kelly. “She has a long history of building coalitions to better

deliver services to vulnerable Kansans. Throughout her career, she’s developed a reputation as an expert in state funded services and collaboration between agencies and organizations.”

Howard is currently the Director of the Public Management Center in the School of Public Affairs and Administration at the University of Kansas. She has a law degree from the University of Kansas and bachelor’s degrees in Public Administration and Economics from Miami University.

Source: <https://www.wibwnewsnow.com/governor-elect-kelly-announces-interim-dcf-and-kdads-secretary-expresses-concern-about-grants/>

Survey, Certification and Credentialing Commission Contact Reference Table

Central Office Staff

Patty Brown, Interim Commissioner

(785) 296-1269
patty.brown@ks.gov

Overall operations of the commission, including state licensure of all adult care homes as defined in Kansas statutes, federal certification of nursing facilities not licensed as part of a hospital and certification surveys of long-term care units of hospitals.

Dawne Stevenson, Director

(785) 296-1023
dawne.stevenson@ks.gov

Licensure and certification survey process of nursing homes, attached assisted living, nursing facilities for mental health and long-term care units of hospitals through supervision of four regional managers. Informal dispute resolution, state agency operations and consultation of federal and state regulations.

Patty Brown, Regional Manager

(785) 296-1269
patty.brown@ks.gov

Licensure and survey process of assisted living, residential health care facilities, home plus, adult day care and boarding care homes through supervision of 6 surveyors. Review of initial licensure policies and procedures, informal dispute resolution, review of facility reports of potential ANE and consultation regarding ACH statutes and regulations for the listed facility types.

Caryl Gill, Complaint Coordinator

(785) 296-1265
caryl.gill@ks.gov

Responsible for the enforcement of complaints.

COMPLAINT HOTLINE – 800 842-0078
kdads.complainthotline@ks.gov

John Easley, Physical Environment Specialist

(785) 296-1247
john.easley@ks.gov

Physical environment licensure of adult care homes, consultation related to physical environment regulations; site and floor plan review.

Lacey Hunter, Licensure & Certification Enforcement Manager

(785) 368-7055
lacey.hunter@ks.gov

Enforcement for annual surveys (Health and LSC). Initial contact for licensing new facilities and change of ownership.

LaNae Workman, Licensure Specialist

(785) 296-1261
lanae.workman@ks.gov

Process applications for: annual renewals, licensed beds, required rooms, change of administrator/operator.

Tina Lewis, Senior Administrative Assistant

(785) 296-1260
tina.lewis@ks.gov

Initial enrollment for nursing homes wanting to become Medicare certified; change of ownership for Medicare certified facilities; and bed change requests (increase/decrease) for Medicare certified facilities.

Survey, Certification and Credentialing Commission Contact Reference Table

Health Occupations Credentialing Staff

Brenda Dreher, Director

(785) 296-6647

Brenda.dreher@ks.gov

Licensure program, certification program, criminal record check program.

Wendy Davis, Licensing Administrator

(785) 296-0061

wendy.davis@ks.gov

Licensing administrator for adult care home administrators, speech language pathologists, audiologists, dietitians and registered operators.

Criminal Record Check Program, Employment Prohibitions, Procedure Questions

Please contact us at KDADS.CRCStaff@ks.gov

Walter Wywadis, Criminal Record Check Specialist

Raevyn Chisholm, Criminal Record Check Specialist

Regional Managers

NE District Office:

Vacant

503 S. Kansas Ave.

Topeka, KS 66603

(785) 368-6552

Fax: (785) 296-0256

dawne.stevenson@ks.gov

NW District Office:

Vacant

2501 Market Place, Ste. D

Salina, KS 67401

(785) 827-9639

Fax: (785) 296-0256

dawne.stevenson@ks.gov

SE District Office:

Janice Van Gotten

137 E. 21st Street

Chanute, KS 66720

(620) 902-6465

Fax: (785)-296-0256

janice.vangotten@ks.gov

SW District Office:

Lori Mouak

266 N. Main, Ste. 230

Wichita, KS 67202

(316) 337-6063

Fax: (785) 296-0256

lori.mouak@ks.gov

PEAK Open Enrollment

PEAK 2.0 Open Enrollment for New Enrollees

Open enrollment for the Promoting Excellent Alternatives in Kansas Nursing Homes (PEAK) 2.0 program is now open. This program coincides with the state fiscal year calendar, July to June. The enrollment period is open from January 7 to April 15. New homes or homes that have been discontinued from the program must enroll to participate. It is not necessary for current and active homes to re-enroll in the program. Homes may not enter the program mid-year. To enroll go to: <https://www.he.k-state.edu/aging/outreach/peak20/>



Questions? Email the PEAK 2.0 Project Team at K-State (ksucoa@gmail.com) or call (785) 532-2776.

Annual CNA/HHA Employment Verification

Begins Jan. 1, 2019 - Deadline March 31st

*First: To update your current employee list, as well as update a person's CNA/HHA certification, you will need to go to your employment list. To do this please follow these steps:

1. Go to www.ksnurseaidregistry.org
2. Select "Facility Access"
3. Enter Facility ID number (can be located on your facilities license, Example: N000000)
4. Once logged on select "Employment Verification Page"

*Next: On the right-hand side there are "Yes and No" buttons for each employee. Please follow the guidelines to determine which option would need to be selected per individual.

1. Certified Individuals: Select "Yes" if the aide has worked at your facility at least 8 hours the prior calendar year, even if they are no longer working at your facility
2. Non-certified: Select "No" if they are no longer working at your facility
3. Certified/Non-Certified: Mark "No" if the individual did not work at your facility, the last calendar year

***At the very bottom make sure you select "Update and save changes" before you exit the page.

For questions, please call: 785-296-6958

Electronic Monitoring Article

The 2018 legislature passed House Bill 2232 establishing provisions for residents or their legal representatives to conduct authorized electronic monitoring (AEM). House Bill 2232 was codified as K.S.A. 39-981.

Both the resident or their legal representative and the adult care home have responsibilities related to AEM:

The resident or their legal representative must complete the “Request for AEM” form, obtain the consent of their roommate if applicable using the “Consent to Authorized Electronic Monitoring” and give the forms to the facility administrator or designee.

The resident or their legal representative are responsible for all costs other than the cost of electricity associated with conducting AEM, including installation, maintenance, removal of the equipment and repair following removal of the equipment.

The facility should have copies of the forms available for residents and families and cannot refuse to admit a resident or discharge a resident because of the request to conduct AEM.

The facility must post a conspicuous notice at the entrance to the adult care home and each resident’s room stating that the rooms of some residents may be monitored electronically by or on behalf of the room’s resident or residents:

The facility may require that AEM be conducted in plain view and installed in a manner that is safe for residents, employees, or visitors who may be moving about the room.

The facility is responsible to make reasonable physical accommodation for AEM, which includes providing a reasonably secure place to mount the video surveillance camera or other electronic monitoring device and provide access to power sources for the video surveillance camera or other electronic monitoring device. The facility is also responsible to make reasonable accommodations if a resident in a multi-resident room wishes to conduct electronic monitoring and the resident or residents with whom the resident shares the room do not consent to the monitoring, including offering to move the resident who wishes to conduct electronic monitoring to another shared room that is available or becomes available.

Some additional provisions of the law include:

A person is prohibited from knowingly hindering, obstructing, tampering with or destroying, without the consent of the resident or individual who authorized electronic monitoring, an electronic monitoring device installed in a resident’s room.

A person is prohibited from knowingly hindering, obstructing, tampering with or destroying, without the consent of the resident or individual who authorized electronic monitoring, a video or audio recording.

Any person who violates K.S.A. 39-981 subsection (n) shall be guilty of a class B nonperson misdemeanor. Any person who violates K.S.A. 39-981 subsection (n) with the intent to commit or conceal the commission of a misdemeanor offense shall be guilty of a class A nonperson misdemeanor. Any person who violates K.S.A. 39-981 subsection (n) with the intent to commit or conceal the commission of a felony offense shall be guilty of a severity level 8 nonperson felony.

The forms and information related to Authorized Electronic Monitoring can be found at [https://kdads.ks.gov/provider-home/adult-care-homes-\(sccc\)](https://kdads.ks.gov/provider-home/adult-care-homes-(sccc))

Web Applications: KOTA and Your Facilities Homepage

Web applications, known as Web Apps, is a web-based system where a user must first electronically sign a user authorization agreement from KDADS, and be approved, to obtain login credentials. Web Apps launched version one in July 2007 and has since had four version updates, which now provides user graphic enhancements, enhanced security and improved performance. Below you will find a direct link to our webpage to request access to Web Apps. One of the main uses of Web Apps for providers is the Kansas Online Tracking Application or KOTA, which is the access selection you will make on the agreement.

This application has many uses for providers which include: updating facility contact information, filing a facilities annual renewal application, requesting a change in required room use, request to change resident capacity, and change the administrator of record. The application also allows you to receive important email notices from KDADS, including bed tax and annual renewal due date reminders. KOTA is also where you go to input your Plan of Corrections for all Health Surveys, if you are a nursing facility.

Facility access in KOTA is person (email) specific; accounts are specific to the person at that facility submitting the agreement and that they don't transfer. If you have a change in personnel and need to remove an individual's access to the facility, please reach out to the KDADS Help Desk to have an account disabled. Link to access Web Application: <http://www.aging.ks.gov/webapps.html>.

If you encounter any issues submitting the agreement of system issues within KOTA, please reach out to the KDADS Helpdesk: KDADS.HelpDesk@ks.gov or (785) 296-4987, Option 1.

Ask John

As it gets cooler please remember there are regulations to ensure resident safety and comfort for buildings of all ages:

26-40-305, Physical Environment; Mechanical, Electrical and Plumbing Systems

(c) Heating, ventilation, and air conditioning systems. Each nursing facility's heating, ventilation, and air conditioning systems shall be initially tested, balanced, and operated to ensure that system performance conforms to the requirements of the plans and specifications.

(3) Each nursing facility shall have a heating, ventilation, and air conditioning system designed to maintain a year-round indoor temperature range of 70°F to 85°F in resident care areas.

An area to put into planning during inclement weather would include reserve heating:

(h) Reserve heating. Each nursing facility's heating system shall remain operational under loss of normal electrical power. Each nursing facility shall have heat sources adequate in number and arrangement to accommodate the nursing facility's needs if one or more heat sources become inoperable due to breakdown or routine maintenance.

The regulation at 305 concludes with ensuring preventive maintenance:

(i) Preventive maintenance program. Each nursing facility shall have a preventive maintenance program to ensure that all of the following conditions are met: (1) All electrical and mechanical equipment is maintained in good operating condition...

Kansas State Fire Marshal

The OSFM would like to provide updates on some current hot topics. Some will be updates on newer requirements and some will be reminders on already established requirements.

To start things off, let's look at customary access. The State Operations Manual (SOM) and the regulations have always required the determination of customary access when deciding what section of the code is applicable. If you have a common space that is intended to serve all inpatients, then it would need to be a Health Care Occupancy (HCO). If you have a common "core area" that is intended to provide services (chapel, beauty shop, etc.) to all inpatients, this "core area" could be customarily accessed by any number of the SNF residents and must be a HCO. No policy limiting access could be imposed to reduce HCO requirement. Other SNF requirements, such as Resident Rights would also affect this determination.

If you have a space that is not intended to serve inpatients, the Life Safety Code would allow a different occupancy classification, but would limit the number of inpatients that may enter this area simultaneously to less than 3. In this case a policy would be permitted to ensure that 4 or more patients do not occupy this space simultaneously. For example, if this "core area" was intended to provide outpatient services (e.g., outpatient imaging), was separated & sprinklered, and was not simultaneously occupied by 4 or more SNF residents, then it could be classified as another occupancy type.

The simplest way to think of it is that it comes down to intended customary access. If you have a common space intended to serve inpatients, then it would need to be HCO. However, if you have a space that is intended to serve outpatients the Code would allow a different occupancy but would restrict the number of inpatients that may enter this area simultaneously.

It is incumbent on the facility to ensure all program rules are met, including the NFPA 101, related references, the regulation, the State Operations Manual, and survey and certification letters. If a facility receives a citation for customary access, each facility would be evaluated on its own merits and they might need an FSES or a waiver of time, depending on the situation.

The next topic we would like to cover has to do with fire doors. This has been a hot topic since the requirement for fire door inspections came down from CMS. NFPA 80, 2010 Edition 5.2.1 says "Fire door assemblies shall be inspected and tested not less than annually, and a written record of the inspection shall be signed and kept for inspection by the AHJ." With the requirement to be on an annual basis, many questions arose on who could do the fire door inspections. NFPA 80 says a "Qualified Person" should do the inspection and that person should meet these standards from 3.3.95 "A person who, by possession of a recognized degree, certificate, professional standing, or skill, and who, by knowledge, training, and experience, has demonstrated the ability to deal with the subject matter, the work, or the project." The discussion came up then on how one becomes qualified to meet the 3.3.95 definition. Our office recently received some clarification from CMS about that topic. To have an employee be deemed "qualified" to do those fire door inspections, there is a class that one can take through the NFPA website called "NFPA 80: Inspection, Testing and Maintenance Requirements for Swinging Fire Doors (2016) Online Training." After this class, one will be able to locate the inspection, testing and maintenance requirements, including frequency and documentation for fire door assemblies and identify the individual inspection components. The course will take a couple hours to complete and at the end there will be a test. Once the test is passed, the individual will need to keep the certificate to be able to show the AHJ that the class was indeed taken and passed.

Kansas State Fire Marshal (continued)

Now turning our attention to the important Emergency Preparedness (EP) update. When the Emergency Preparedness requirement was first rolled out back in November of 2017, CMS called for a soft roll out and asked to keep the tags at a “c” level for all EP Plans. Now that the Emergency Preparedness has been out for over a year, the scope and severity will now be determined like the K-Tags, and failure to meet most E-Tag criteria will be considered widespread.

The last update is the delayed egress requirements for Assisted Living and Residential Board and Care facilities (DOES NOT APPLY TO NURSING HOMES). When we are talking about egress locks for these facilities, the strictest locking devices that code allows is a 15-second delayed egress per NFPA 101 2006 33.2.2.5.5.1. No total locks or magnetic locks are allowed for these types of facilities. In certain cases, facilities can apply for a waiver or variance for a stricter locking device, 30-second delay or even a magnetic lock, but that request would be reviewed by our office and be approved or denied. For further information regarding the waiver or variance, please contact me our office.

If you have any further questions about any of these topics or any other fire safety questions, please feel free to contact me via email at joel.c.beckner@ks.gov or by phone at 785-296-0659.

483.15© (1) and (2) i-ii -- Admission, Transfer and Discharge Rights

In the fall of 2017, changes were made to these requirements.

F622 Transfer and Discharge Requirements: When the facility transfers or discharges a resident under any circumstance the facility must ensure the transfer or discharge is documented in the resident’s medical record and appropriate information is communicated to the receiving health care provider.

This documentation must include:

- The basis for transfer.
- If the transfer or discharge is for medical necessity for the resident’s welfare and the needs cannot be met at the facility, the record must have specific needs that can’t be met, the attempts to meet the needs and that the service is available at the receiving facility.
- Documentation must be made by resident’s physician when discharge is necessary.

The facility must send the following information to the receiving facility:

- Contact information of the practitioner responsible for the care of the resident.
- Contact information of the resident representative
- Advanced Directive Information.
- Special instructions or precautions for ongoing care.

- Comprehensive care plan goals.
- Necessary information to ensure a safe transition of care.

F623 483.15 C (3) Notice Before Transfer: before the facility transfers or discharges a resident the following must occur:

- Notification of the resident and the resident’s representative of the transfer or discharge and the reasons for the move in writing and in a language that is understandable. A copy of this notice must be sent to the Office of the State Long-Term Care Ombudsmen (LTCO). This notice must contain the reason for transfer discharge, the effective date, the location to which the resident is to be transferred or discharged, a statement of the resident’s appeal rights. The name, address (email and physical) of the State LTCO office.
- This notice must be provided within 30 days of the transfer or discharge unless the resident’s welfare is at risk, his or her needs cannot be met (emergency transfer to an acute care facility) or the health and safety of other residents is endangered.

If you have any questions, please reach out to your Regional Manager or the State Ombudsman Office.

2018 Zero Deficiency Surveys

The following facilities received “zero” deficiencies on their 2018 survey.

SNF/NF: Skilled Nursing Facility ALF: Assisted Living Facility RHCF: Residential Health Care Facility HP: Home Plus ADC: Adult Day Care BCH: Boarding Care Home

FACILITY	CITY	FACILITY TYPE	SURVEY DATE
The Homestead of Garden City (Amended)	Garden City	ALF	2/27/17
Country Place Senior Living of Marysville	Marysville	ALF	1/3/18
Vintage Park at Wamego LLC	Wamego	ALF	1/10/18
The Heritage of Overland Park	Overland Park	RHCF	1/11/18
Brookdale McPherson	McPherson	ALF	1/18/18
Bethesda Home	Goessel	SNF/NF	1/29/18
The Meadows	Burlington	ALF	1/29/18
Village Estates	Nortonville	ALF	1/31/18
Kelly House of Meriden	Meriden	HP	2/1/18
Vintage Park at Paola LLC	Paola	ALF	2/6/18
Lakeview Village	Lenexa	ALF	2/15/18
Rolling Hills Assisted Living Apartments	Topeka	ALF	2/21/18
Crestview Nursing & Residential Living	Seneca	ALF	2/28/18
Vintage Park at Baldwin City LLC	Baldwin City	ALF	3/1/18
Prairie Homestead Assisted Living	Wichita	ALF	3/8/18
Galena Nursing & Rehabilitation Center	Galena	SNF/NF	3/15/18
Premier Living by Warden LLC 3	Towanda	HP	3/27/18
Premier Living by Warden LLC 4	Wichita	HP	3/29/18
Bridge Haven Village "Two"	Lawrence	HP	4/3/18
Autumn Home Plus, Inc	Topeka	HP	4/4/18
Comfortcare Homes of Baldwin City LLC	Baldwin City	HP	4/10/18
Stoneybrook Assisted Living	Manhattan	ALF	4/10/18
The Homestead of Garden City	Garden City	ALF	4/10/18
Coffey County Hospital LTCU	Waverly	NF	4/19/18
Care Haven Homes - Sunflower	Leawood	HP	4/23/18
Marion Assisted Living LLC	Marion	ALF	4/23/18
Comfortcare Homes of Harvey County	Newton	HP	4/24/18
Joy Home	Oxford	HP	4/27/18
Two Trails Healthcare	Olathe	ALF	4/24/18
Andover Court Assisted Living	Andover	ALF	4/30/18
Maria Court	Mulvane	ALF	5/1/18
Cedarview Assisted Living	Hays	ALF	5/8/18
Vintage Park of Osage City LLC	Osage City	ALF	5/8/18
Carrington at Cherry Creek	Wichita	ALF	5/10/18
Marjorie's Home of Kingman LLC	Kingman	HP	5/21/18
Pioneer Ridge Retirement Community	Lawrence	ALF	5/22/18
Vintage Park at Eureka LLC	Eureka	ALF	5/23/18
Homestead of Derby	Derby	ALF	5/24/18
Bethel Home, Inc.	Montezuma	SNF/NF	6/5/18
Parsons Presbyterian Manor	Parsons	ALF	6/5/18

FACILITY	CITY	FACILITY TYPE	SURVEY DATE
Rose Estates Assisted Living Community	Overland Park	ALF	6/5/18
Grace Cottage, LLC	Wichita	ALF	6/7/18
Lawrence Memorial Hospital SNF	Lawrence	SNF	6/11/18
The Homestead of Wichita	Wichita	HP	6/13/18
Good Samaritan Society	Liberal	SNF/NF	6/14/18
Medicalodges Wichita	Wichita	SNF/NF	6/14/18
Reflection Living of Hidden Lakes LLC	Wichita	HP	6/14/18
Seniorcare Homes Hanover House	Overland Park	HP	6/19/18
Country Place Senior Living of Independence	Independence	ALF	6/20/18
Gran Villas Independence	Independence	ALF	6/21/18
Regent Park Rehabilitation & Healthcare	Wichita	SNF/NF	6/25/18
Brookdale Salina Fairdale	Salina	ALF	6/26/18
Hutchinson Operators	Hutchinson	SNF/NF	6/26/18
Wichita Care & Rehabilitation Center	Wichita	SNF/NF	6/26/18
Westridge	Girard	ALF	6/27/18
Stevens Co Hosp LTCU d/b/a Pioneer Manor	Hugoton	NF	6/28/18
Colwich Gardens LLC	Colwich	ALF	7/2/18
Eastridge	Centralia	SNF/NF	7/3/18
Atria Hearthstone West	Topeka	ALF	7/3/18
The Pines of Hiawatha South	Hiawatha	HP	7/5/18
Claridge Court	Prairie Village	SNF	7/11/18
Aberdeen Village	Olathe	SNF/NF	7/12/18
Pratt Health & Rehabilitation Center	Pratt	SNF/NF	7/12/18
Medicalodges Kinsley	Kinsley	SNF/NF	7/17/18
Dooley Center	Atchison	NF	7/18/18
Derby Health & Rehabilitation Center LLC	Derby	SNF/NF	7/19/18
Larksfield Place	Wichita	SNF/NF	7/19/18
Sterling Presbyterian Manor	Sterling	SNF/NF	7/25/18
MTM Boarding Care Home	McPherson	BCH	7/31/18
The Wheatlands Healthcare Center	Kingman	SNF/NF	8/1/18
Baldwin Health & Rehabilitation Center	Baldwin City	SNF/NF	8/2/18
Heritage Estates Assisted Living	Harper	ALF	8/2/18
Coffey Regional Medical Center	Coffeyville	SNF	8/7/18
Sunrise Assisted Living of Overland Park	Overland Park	ALF	8/8/18
Country Living of Larned Home Plus II	Larned	HP	8/15/18
Caritas Center, Inc.	Wichita	SNF/NF	8/20/18
Comfortcare Homes of Harvey County			
Annabelles Cottage	Newton	HP	8/22/18
Avita Senior Living at Derby	Derby	ALF	8/27/18
Lakepoint Wichita LLC	Wichita	SNF/NF	8/30/18
Kansas Veterans Home	Winfield	ALF	9/5/18
Assisted Living at Windsor Place	Coffeyville	ALF	9/11/18
Brookdale Great Bend	Great Bend	ALF	9/12/18
Diversicare of Hutchinson	Hutchinson	SNF/NF	9/19/18
Nottingham Health & Rehabilitation	Olathe	SNF/NF	9/19/18

FACILITY	CITY	FACILITY TYPE	SURVEY DATE
Advanced Health Care of Overland Park	Overland Park	SNF/NF	10/4/18
Homestead of Russell	Russell	ALF	10/4/18
Johnsonville Home LLC	Kansas City	HP	10/18/18
Hill Top House	Bucklin	SNF/NF	10/30/18
Stratford Commons Memory Care	Overland Park	ALF	10/31/18
Wellsville Manor	Wellsville	SNF/NF	10/31/18
Solomon Valley Manor	Stockton	SNF/NF	11/6/18
Brookdale Hays	Hays	ALF	11/1/18
Harmony Adult Home Plus	McPherson	HP	11/6/18
Fowler Residential Care	Fowler	SNF/NF	11/7/18
Keen Boarding Care Home	Clay Center	BCH	11/8/18
Seniorcare Homes Newport House	Leawood	HP	11/8/18
Country Place Senior Living of Seneca	Seneca	ALF	11/21/18
Garten Countryside Home, Inc.	Abilene	HP	11/29/18
Kearny County Hospital LTCU	Lakin	LTCU	11/29/18
Pleasant View Home	Inman	SNF/NF	11/29/18