



Legislation passed this session, effective July 1, 2018, which made changes to the criminal record check laws for Adult Care Homes (K.S.A. 39-970), Home Health Agencies (K.S.A. 65-5117) and HCBS Providers (K.S.A. 39-2009).

One of the most notable changes to be Implemented as of July 1, 2018 is a **New List of Prohibiting Offenses and Time Frames.** There are other changes to be implemented in phases.

Please check the Health Occupations Credentialing web page at www.kdads.ks.gov/hoc periodically as we will be adding a list illustrating the changes to the prohibiting offenses as well as an outline/ update regarding other elements of the law changes and implementation plan.

Sensitivity Testing Requirements

There are many requirements that a facility must keep track of when it comes to the fire code. One of the requirements that is often overlooked is sensitivity testing for smoke detector.

This testing is very important because it will tell the facility if their smoke detectors are calibrated to the correct level where it can properly work in the event of an actual fire. This article will tell you some important facts of sensitivity testing to help your facility out. 2010 NFPA 72 has the following information regarding this matter.

Sensitivity testing is required within one year of install, two years after that and if there are no problems may be extended to every five years – but only if records of nuisance alarms are maintained.

- **14.4.5.3.1** Sensitivity shall be checked within 1 year after installation.
- 14.4.5.3.2 Sensitivity shall be checked every alternate year thereafter unless otherwise permitted by compliance with
- **14.4.5.3.3.** 14.4.5.3.3 After the second required calibration test, if sensitivity tests indicate that the device has remained within its listed and marked sensitivity range (or 4 percent obscuration light gray smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of 5 years.
- 14.4.5.3.3.1 If the frequency is extended, records of nuisance alarms and subsequent trends of these alarms shall be maintained.
- 14.4.5.3.3.2 In zones or in areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed. With this information provided, this should help facilities understand the process of sensitivity testing and how important it is to do. Please reach out to our office if you have any further questions about this topic.

Reporting to the Hotline

What should be reported to the hotline?

- Alleged violations related to mistreatment, exploitation, neglect, or abuse, including misappropriation of resident property and report the results of all investigations to the proper authorities within prescribed timeframes.
- In addition, 609 directs facilities to report injuries of unknown source

Reporting:

- Who resident(s) name and cognitive status; staff name if witness or AP
- What description of the incident include resident's statement, witness reports, description of missing item and value
- When date and time of the incident and date and time reported
- Where location where the incident occurred
- Immediate actions time/date legal representative and medical care provider notified; interventions



Reporting - Falls:

- Resident's functional status for bed mobility, transfer and walking/ambulation
- 90 day fall history
- Assistive devices (including alarms) were they used/working?
- If fall from bed type of mattress
- Is resident on medication that may increase bleeding risk?
- Care plan at time of fall- was it being followed? + any new interventions
- Findings of nursing assessment

Reporting – Resident Leaves the facility:

- How do you know resident left the facility?
- Who informed the facility the resident left?
- What exit was used? How do you know that?
- Exact location where resident was found and distance from facility
- What was the resident wearing when he/she left the facility?
- Environmental issues: hazards on likely path busy streets, bodies of water, railroad tracks, outside temperature and weather conditions
- Resident's mode of ambulation
- Findings of nursing assessment including body temperature and injuries
- Dates and results of elopement risk assessments
- Previous attempt/elopements
- Interventions in place at time of incident and implemented after the incident
- If assessed as safe to leave the facility, what was the plan to keep the resident safe when gone- sign out with expected return time, etc.
- Immediate measures put in place to prevent resident from leaving without staff knowledge again?
- Presence of door alarms, wanderguards were they working? How often are they checked?
- How many other residents at risk?
- Staffing at the time of the incident

Reporting – Injury of Unknown Source (federal only):

- Was the resident able to explain the injury?
- Is the injury suspicious due to extent or location?
- Injuries of unknown source- an injury should be classified as an "injury of unknown source" when both of the following criteria are met:

The source of the injury was not observed by any person or the source of the injury could not be explained by the resident; AND the injury is suspicious because of the extent of the injury or the location of the injury (e.g., the injury is located in an area not generally vulnerable to trauma) or the number of injuries observed at one particular point in time or the incidence of injuries over time. (609)

Assisted livings, residential healthcare, and home plus do not have this requirement:

Abuse:

- What did the resident say?
- Who reported the abuse?
- When was the abuse reported and to whom?
- What did staff do when the abuse was reported?
- What is the specific allegation of abuse?

- Was there anyone else in the area?
- What did staff observe or hear?
- What does the assessment of the resident show? Injury? Fear? Emotional distress?
- How was the resident found (on rounds, resident was crying out, etc.)

Reporting - Abuse:

- Was the incident/allegation reported to law enforcement if so, which agency?
- What interventions were put in place to protect residents until the investigation is complete?
- Removing the AP from access to the resident until the investigation has been completed and ruled out abuse, etc.

Neglect:

- What did the resident say?
- What did the care plan/facility policy say?
- What were staff doing at the time of the incident?
- How was the resident found? (On rounds, etc?)
- Witnessed/unwitnessed

Neglect - Elopement:

- Was the resident care planned to leave the building unaccompanied?
- Did the resident notify someone/sign out?

Exploitation/Misappropriation of resident property:

- When was the item last accounted for?
- Will the resident permit a room search?
- Who had access? Other residents? Family? Staff?
- What was the value of the item?
- Is it an allegation of exploitation or misappropriation?
- Was it reported to law enforcement? If so, which agency?
- 602 states that residents' property includes all residents' possessions, regardless of their apparent value to others since they may hold intrinsic value to the resident.
- 602 states that examples of resident property included jewelry, clothing, furniture, money, and electronic devices. The resident's personal information such as name and identifying information, credit cards, bank accounts, driver's licenses and social security cards.

Important to note:

- The hotline determines whether an incident is reportable or not based on the information the facility gives them at the time.
- If the incident is "keep report on file", and during your investigation you find additional information that may change the outcome, call the hotline back



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

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FACILITY	CITY	TYPE	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	Goessell	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
Rose Estates Assisted Living Community	Overland Park	ALF	6/5/18
Grace Cottage, LLC	Wichita	ALF	6/7/18
Good Samaritan Society	Liberal	SNF/NF	6/14/18
Medicalodges Wichita	Wichita	SNF/NF	6/14/18