STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	175126	A. BUILDING _____ B. WING _____	10/14/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VALLEY VIEW SENIOR LIFE	1417 W ASH ST JUNCTION CITY, KS 66441

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS The following citations represent the findings of a Health Resurvey and Complaint Investigation #153463. The 2567 was electronically sent to the facility on 10/15/2020.	F 000		
F 761 SS=D	Label/Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2) §483.45(g) Labeling of Drugs and Biologicals Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable. §483.45(h) Storage of Drugs and Biologicals §483.45(h)(1) In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys. §483.45(h)(2) The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected. This REQUIREMENT is not met as evidenced by: The facility had a census of 74 residents. The sample included 18 residents. Based on observation, record review, and interview, the	F 761		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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F 761	Continued From page 1	F 761		

facility failed to date Resident (R) 23's insulin vials when opened and discard outdated stock medications in two of four medication/treatment carts.

Findings included:

- On 10/08/20 at 08:30 AM, observation during initial tour of the medication cart on Heritage Hall revealed two Humalog insulin (rapid acting human hormone that regulates the level of glucose or sugar in the blood) flex pens, lacked a date when opened, and one bottle of Loratadine (antihistamine medication that reduces the effects of sneezing, itching, watery eyes, and runny nose), 10 milligram (mg), 100 tablets, expired June 2020.

On 10/08/20 at 08:35 AM, Licensed Nurse (LN) I verified R23 received the insulin daily, the Humalog pen lacked a date opened, and the Loratadine expired June 2020.

On 10/12/20 at 04:30 PM, Administrative Nurse D stated the nurses were to date the insulin pens when opened and discard expired stock medications.

The facility's "Medication Access and Storage" policy, dated 01/15/20, documented medications are labeled in accordance with facility requirements and Kansas and Federal laws. All drug containers will be labeled, and drug labels must be clear, consistent, legible and in compliance with State and Federal requirements. There will be a standard method for appropriately and safely labeling medications dispensed to all residents. Floor stock medications are labeled "floor stock" or "house supply" and kept in the

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F 761	Continued From page 2	F 761		

original manufacture's containers with the expiration date and a lot number clearly evident. Upon opening of insulin pens, the licensed nurse will write the date opened along with resident's name on the pen itself.

The facility failed to document the date R23's Humalog flex pens opened and failed to discard expired stock medication in the medication cart, placing the residents at risk for use of ineffective medications.

- On 10/08/20 at 09:01 AM, observation during initial tour of the Sunflower Lane medication cart revealed one bottle of Vitamin E, 400 International Units (IU), 100 soft gels, expired September 2020.

On 10/08/20 at 09:05 AM, License Nurse (LN) G verified the Vitamin E soft gels were expired and the nurse should check the carts for expired medications before use. LN G replaced the Vitamin E soft gels with a new unexpired bottle.

On 10/08/20 at 09:19 AM, observation during initial tour of Lilac Lane medication cart revealed Aspirin 81 milligrams (mg) and Loratadine Allergy Relief, 10 mg (allergy medication) were not labeled with the date opened.

On 10/08/20 at 09:24 AM, LN H verified the Aspirin 181 mg and Loratadine Allergy Relief 10 mg bottles were not labeled with the date opened.

The facility's "Medication Labeling and Storage" policy, dated 01/15/20 documented medications are labeled in accordance with facility requirements and Kansas and Federal laws. All

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F 761	Continued From page 3 drugs containers will be labeled, and drug labels must be clear, consistent, legible and in compliance with State and Federal requirements. There will be a standard method for appropriately and safely labeling medications dispensed to all residents. Floor stock medications are labeled "floor stock" or "house supply" and kept in the original manufacturers' containers with the expiration date and a lot number clearly evident. Upon opening of insulin pens, the licensed nurse will write the date opened along with resident's name on the pen itself. The facility failed to discard expired Vitamin E soft gels, and label Aspirin and Loratadine Allergy Relief bottles in one of four medication carts with date opened, placing the residents at risk for use of ineffective medications	F 761		