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	N046053	A. BUILDING: _____ B. WING _____	05/08/2019

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BROOKDALE SHAWNEE	11400 W 65TH STREET SHAWNEE, KS 66203

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S 000	INITIAL COMMENTS The following citations are the result of a survey for re-licensure with attached complaints conducted on 5/6/19, 5/7/19 and 5/8/19 at the above named assisted living facility in Shawnee, KS.	S 000		
S3101 SS=E	26-41-202 (h) NSA Signatures (h) Each individual involved in the development of the negotiated service agreement shall sign the agreement. The administrator or operator shall ensure that a copy of the initial agreement and any subsequent revisions are provided to the resident or the resident's legal representative. This REQUIREMENT is not met as evidenced by: KAR 26-41-202(h) The census equaled 54 residents, the sample included 3 residents and 2 closed review residents. Based on record review for 2 (#507, 508) sampled residents, the operator failed to ensure each individual involved in the development of the negotiated service agreement signed the agreement. Findings included: - Record review for resident #507 recorded admission date of 4/29/19 with diagnoses of dementia, chronic cystitis, osteoarthritis, gastro-esophageal reflux, unsteady gait,	S3101		

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

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S3101	Continued From page 1	S3101		

constipation and vitamin deficiency.

Functional Capacity Screen (FCS) dated 4/29/19 recorded resident required physical assistance with bathing and unable to perform management of medications and treatments. Resident has problems with short term memory, long term memory, memory recall and decision making.

Negotiated service agreement/ health care service plan (NSA/HCSP) dated 4/29/19 recorded resident to receive assistance twice a week with showering, and assistance with medications. Resident wanders and requires redirection.

NSA/HCSP was signed by licensed nurse #B.

NSA/HCSP lacked the signature of resident's responsible party/participant in the development of the NSA/HCSP.

Interview on 4/7/19 at 4:50pm with licensed nurse #B confirmed resident admitted for a respite stay and [DPOA] did not sign the NSA/HCSP.

Record review for resident #508 recorded admission date of 3/15/18 with diagnoses of dementia, Left radial fracture, history of falls, scalp laceration, anemia, claustrophobia, anxiety and coronary artery disease.

FCS dated 3/7/19 recorded resident required physical assistance with bathing, dressing, toileting, transfer and is unable to perform walk/mobility and management of medications and treatments. Resident has problems with cognition including: short term memory, long term memory, memory recall and decision making.

NSA/HCSP dated 3/7/19 recorded resident to

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S3101	Continued From page 2 receive physical assistance with bathing, dressing, toileting, transfer, walk/mobility, management of medications and treatments and cognitive issues. Behavior management: [resident]has been more anxious, had meeting with DPOA, hospice team and myself [licensed nurse #B] 3/6/19 to discuss signs and symptoms of end of life. NSA/HCSP was signed by licensed nurse #B. NSA/HCSP lacked the signature of resident's responsible party and other participants in the development of the NSA/HCSP. Interview on 4/7/19 at 4:50pm with licensed nurse #B confirmed NSA/HCSP contained changes to the agreement/ plan of care and lacked the signature of DPOA, he/she stated DPOA refused to sign the agreement. He/she confirmed lack of documentation that DPOA has refused to sign the agreement. Facility is a secured memory care/ dementia facility. For residents #507 and 508, the operator failed to ensure each individual involved in the development of the negotiated service agreement signed the agreement.	S3101		
S3130 SS=D	26-41-203 (d) Special Care Services (d) Special care. Any administrator or operator of an assisted living facility or residential health care facility may choose to serve residents who do not exceed the facility ' s admission and retention criteria and who have special needs in a special care section of the facility or the entire facility, if	S3130		

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S3130	Continued From page 3 the administrator or operator ensures that all of the following conditions are met: (1) Written policies and procedures are developed and are implemented for the operation of the special care section or facility. (2) Admission and discharge criteria are in effect that identify the diagnosis, behavior, or specific clinical needs of the residents to be served. The medical diagnosis, medical care provider ' s progress notes, or both shall justify admission to the special care section or the facility. (3) A written order from a medical care provider is obtained for admission. (4) The functional capacity screening indicates that the resident would benefit from the services and programs offered by the special care section or facility. (5) Before the resident ' s admission to the special care section or facility, the resident or resident's legal representative is informed, in writing, of the available services and programs that are specific to the needs of the resident. (6) Direct care staff are present in the special care section or facility at all times. (7) Before assignment to the special care section or facility, each staff member is provided with a training program related to specific needs of the residents to be served, and evidence of completion of the training is maintained in the employee's personnel records. (8) Living, dining, activity, and recreational areas are provided within the special care section, except when residents are able to access living, dining, activity, and recreational areas in another section of the facility. (9) The control of exits in the special care section is the least restrictive possible for the residents in that section.	S3130		

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S3130	Continued From page 4 This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-203 (d)(3) The facility reported a census of 54 residents. The sample included 3 residents and 2 closed review residents. Based on record review, observation and interview for 1 (#507) sampled resident the operator failed to ensure the resident's record contained a written order from a medical care provider for admission to a special care services facility. Findings included: - Record review for resident #507 recorded admission date of 4/29/19 with diagnoses of dementia, chronic cystitis, osteoarthritis, gastro-esophageal reflux, unsteady gait, constipation and vitamin deficiency. Functional Capacity Screen (FCS) dated 4/29/19 recorded resident required physical assistance with bathing and unable to perform management of medications and treatments. Resident has problems with short term memory, long term memory, memory recall and decision making. Negotiated service agreement/ health care service plan (NSA/HCSP) dated 4/29/19 recorded resident to receive assistance twice a week with showering, and assistance with medications. Resident wanders and requires redirection. Observation on 5/7/19, at 12:04pm, revealed the	S3130		

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S3130	Continued From page 5 resident in his/her room in the locked special care/ memory facility. Review of resident records revealed record lacked physician's order for admission to the facility. Interview on 4/7/19 at 5:00pm with licensed nurse #B confirmed resident record lacked a physician's order for admission to the locked/ special care facility. For resident #507 the operator failed to ensure the resident's record contained a written order from a medical care provider for admission to a special care services facility.	S3130		
S3155 SS=D	26-41-204 (a) Health Care Services . (a) The administrator or operator in each assisted living facility or residential health care facility 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. This REQUIREMENT is not met as evidenced by: KAR 26-41-204(a) The facility reported a census of 54 residents. The sample included 3 residents and 2 closed review residents. Based on record review,	S3155		

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S3155	Continued From page 6	S3155		

observation and interview for 1 (#506) sampled resident requiring health care services, the operator failed to 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.

Findings included:

- Record review for sampled resident #506 recorded admission date of 8/15/18 with diagnoses including: dementia, diffuse traumatic brain injury, diabetes mellitus type 1, hypertension, rosacea, glaucoma, anemia and hyperlipidemia.

Functional capacity screen dated 2/26/19 recorded resident required physical assistance with transfer and walk/mobility.

Negotiated service agreement/ health care service plan dated 2/26/19 dated 2/26/19 recorded resident to receive assistance of 2 persons with transfer and walk/mobility. Skin Care: Vascular wound to left heel.

Nurses notes recorded the following: 12/5/18 at 2:00pm: "blister to left heel noted."

Observation on 5/7/19 at 11:14am in resident's room revealed 2 heel protector boots and pressure reduction mattress on the twin bed.

Interview on 5/7/19 at 5:00pm with licensed nurse #B confirmed resident used pressure reduction boots and mattress and NSA/HCSP lacked

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S3155	Continued From page 7 entries for these interventions. For resident #506 who required health care services, the operator failed to 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.	S3155		
S3211 SS=E	26-41-205 (g) (3) OVER THE COUNTER DRUGS (3) A licensed nurse or medication aide may accept over-the-counter medication only in its original, unbroken manufacturer ' s package. A licensed pharmacist or licensed nurse shall place the full name of the resident on the package. If the original manufacturer ' s package of an over-the-counter medication contains a medication in a container, bottle, or tube that can be removed from the original package, the licensed pharmacist or a licensed nurse shall place the full name of the resident on both the original manufacturer ' s medication package and the medication container. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(g) (3) The facility reported a census of 54 residents. The sample included 3 residents and 2 closed review residents. The resident roster identified 53 residents as receiving medication management. Based on observations and interviews for 53 residents, the operator failed to	S3211		

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S3211	Continued From page 8 ensure a licensed nurse or licensed pharmacist placed the full name of the resident on packages of over-the-counter medications. Findings included: - Observation on 5/6/19 from 1:40pm to 3:15pm during facility tour of medication carts the locked carts contained OTC medications (over the counter) which lacked the resident's full names on the bottles including: In medication cart for Hall A with certified staff #C: Adult Multi-vitamin gummies, (supplement) 320 count [room number written on cap]. And in medication cart for Hall C with certified staff #C: Walgreens brand 8 hour pain reliever, acetaminophen (pain), 650mg (milligram), 100count capsules. [first name on lid], [room number on bottle]. Interview during facility tour on 5/7/19 with certified staff #C confirmed the OTC's lacked full resident names on the labels. For 53 residents of the facility, the operator failed to ensure a licensed nurse or licensed pharmacist placed the full name of the resident on packages of over-the-counter medications.	S3211		
S3215 SS=D	26-41-205 (h) Medication Storage (h) Storage. Licensed nurses and medication aides shall ensure that all medications and	S3215		

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S3215	Continued From page 9 biologicals are securely and properly stored in accordance with each manufacturer ' s recommendations or those of the pharmacy provider and with federal and state laws and regulations. (1) Licensed nurses or medication aides shall store non-controlled medications and biologicals managed by the facility in a locked medication room, cabinet, or medication cart. Licensed nurses and medication aides shall store controlled medications managed by the facility in separately locked compartments within a locked medication room, cabinet, or medication cart. Only licensed nurses and medication aides shall have access to the stored medications and biologicals. (2) Each resident managing and self-administering medication shall store medications in a place that is accessible only to the resident, licensed nurses, and medication aides. (3) Any resident who self-administers medication and is unable to provide proper storage as recommended by the manufacturer or pharmacy provider may request that the medication be stored by the facility. (4) A licensed nurse or medication aide shall not administer medication beyond the manufacturer ' s or pharmacy provider ' s recommended date of expiration. This REQUIREMENT is not met as evidenced by: K.A.R 26-41-205(h) The facility reported a census of 54 residents. The sample included 3 residents. Based on observation and record review for non-sampled	S3215		

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S3215	Continued From page 10 resident (#511) the operator failed to ensure that licensed nurses and medication aides ensure that all medications and biologicals are securely and properly stored in accordance with each manufacturer's recommendations or those of the pharmacy provider and with federal and state laws and regulations. Findings included: - Observation on 5/6/19 at 2:10 pm during facility tour, in the locked medication cart in the locked narcotic box for B Hall: Liquid Lorazepam concentrate (anxiety) 2mg/ml (milligrams/milliliter), 1 bottle opened, filled on 3/31/19, according to narcotic count record: first administered on 4/1/19 at 2:00am, most recent dose administered on 5/6/19 at 9:01am. Manufacturers recommendations according to www. PDR. com "Store between 36 degrees to 46 degrees" Pharmacy sticker on medication box stated "needs to be in the fridge." Medication was stored at room temperature (approximately 70 degrees) not at recommended storage temperature. For resident # 511 the operator failed to ensure that licensed nurses and medication aides ensure that all medications and biologicals are securely and properly stored in accordance with each manufacturer's recommendations or those of the pharmacy provider and with federal and state laws and regulations.	S3215		

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S3299	Continued From page 11	S3299		
S3299 SS=F	26-41-206 (e) (1) Facility Food Storage (e) Food storage. Facility staff shall store all food under safe and sanitary conditions. (1) Containers of poisonous compounds and cleaning supplies shall not be stored in the areas used for food storage, preparation, or serving. This REQUIREMENT is not met as evidenced by: KAR 26-41-206(e) The facility census equaled 54. Based on observation, the operator failed to ensure the facility staff stored all food under safe and sanitary conditions. Findings included: - Observation on 5/6/19 from 1:05pm to 3:15pm during facility tour revealed the following: In the facility kitchen refrigerator at 1:30pm with dietary supervisor #D revealed the following unlabeled items: A stainless steel pan of chopped onions; a 1 quart square container with green lid which contained a creamy salad mixture; a stainless steel bowl of mayonnaise approximately 1/3 full; items lacked labels for date and contents. In A hall kitchenette refrigerator with operator #A: a plastic bottle with a chocolate type of mix, a square of margarine in partial original wrapper chopped into, a container of juice no label. In B hall kitchenette cabinet over the toaster with	S3299		

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S3299	Continued From page 12 operator #A: 5 open bottles of Monarch brand ketchup, no open date (Website for Heinz brand ketchup stated ketchup may be stored at room temperature safely if used within one month, for best product store the ketchup in the refrigerator.); a square plastic container of sugar covered with plastic wrap with a plastic cup in the sugar. In B hall kitchenette freezer with operator #A: a plastic cup, no cover, full of a tan colored ice cream. In the refrigerator: Hormel premium pastrami 32 ounces in original plastic, open/exposed to air, no open date; plastic grocery bag containing garlic cloves and ginger root, no label; 2 quart plastic container of mandarin oranges covered with plastic wrap, no label; Jenny O brand turkey breast in saran wrap and original wrapper 2 pounds, no open date; V8 brand vegetable juice in original can with sliced open top, 2/3 full with contents dried on sides, no open date. In C hall refrigerator with operator #A, a sandwich on a plate covered, no label; in butter door; a bowl of yellow solid substance (resembling melted butter) covered with plastic wrap, no label; a block of margarine in original wrapper with plastic wrap (about 8 tablespoon left), exposed to air, no date. Facility is a locked memory care facility. All residents eat at the facility. For all residents, the operator failed to ensure the facility staff stored all food under safe and sanitary conditions.	S3299		