STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N098002	A. BUILDING: _____ B. WING _____	06/16/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TREGO LEMKE ASSISTED LIVING	303 N 14TH ST WA KEENEY, KS 67672

(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) COMPLETE DATE
S 000	INITIAL COMMENTS The following citations represent the findings of the licensure resurvey for the above named facility conducted on 06/15/22 and 06/16/22.	S 000		
S3175 SS=E	26-41-205 (a) (1) Self Administration of Medication (a) Self-administration of medication. Any resident may self-administer and manage medications independently or by using a medication container or syringe prefilled by a licensed nurse or pharmacist or by a family member or friend providing this service gratuitously, if a licensed nurse has performed an assessment and determined that the resident can perform this function safely and accurately without staff assistance. (1) An assessment shall be completed before the resident initially begins self-administration of medication, if the resident experiences a significant change of condition, and annually. This REQUIREMENT is not met as evidenced by: KAR 26-41-205 (a) (1) The census equaled 6 residents. The sample included 3 residents. Based on record review, observation, and interview for 2 Residents (R) 369 and R 615, the facility failed to ensure a licensed nurse performed an assessment annually for residents who self-administered their medications.	S3175		

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

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S3175	Continued From page 1	S3175		

Findings included:

- The "Resident Roster" obtained on 06/15/22 from Operator/ Licensed Nurse A failed to identify residents who self-administered their medications.

Review of R369's "Medical Record" revealed he admitted to the facility on 08/25/21 with diagnoses of heart failure, chronic obstructive pulmonary disease, type 2 diabetes mellitus without complications, chronic kidney disease, polyneuropathy, hypertension, arteriosclerotic heart disease, hyperlipidemia, hypothyroidism, insomnia and gout.

R369's current "Functional Capacity Screen" dated 08/25/21 identified the resident required physical assistance with management of his medications or medical treatments.

R369's current "Negotiated Service Agreement/Health Care Service Plan" dated 08/25/21 identified staff set up medications for AM and PM.

R369's current June 2022 "Medication Administration Record" (MAR) identified the following medication as "unsupervised": "Systane Complete Solution, instill 2 drop in both eyes at bedtime for dry eyes."

Review of R369's record on 06/15/22 lacked evidence a licensed nurse performed a self-administration of medication evaluation for the resident until 06/15/22.

- Review of R615's "Medical Record" revealed she admitted to the facility on 11/08/19 with diagnoses of hypertension, Vitamin D deficiency,

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S3175	Continued From page 2	S3175		

hyperlipidemia, osteoporosis, dry eye syndrome of bilateral lacrimal glands, chronic kidney disease, muscle weakness and dementia without behavioral disturbances.

R615's current "Functional Capacity Screen" dated 11/15/21 identified the resident required physical assistance with management of her medications or medical treatments.

R615's current "Negotiated Service Agreement/Health Care Service Plan" dated 12/31/21 identified staff set up medications and R615 keeps Aspercreme and lubricating eye drops in her room to use as instructed by physician.

R615's current June 2022 "Medication Administration Record" (MAR) identified the following medication as "may keep at bedside": "Systane eye drops, use every 1 hour as needed and Aspercreme topical, 4 times daily as needed."

Review of R615's record on 06/15/22 lacked evidence a licensed nurse performed a self-administration of medication evaluation for the resident until 06/15/22.

Observation on 06/15/22 of R615's room revealed a bottle of Systane eye drops on a table next to her chair.

During an electronic interview on 06/16/22 at 8:36 AM, Operator/ Licensed Nurse A confirmed she was unable to locate a medication self-administration assessment for R369 and R615 prior to completing both assessments on 06/15/22.

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S3175	Continued From page 3 The facility's "Medications Self-Administration" policy dated 06/17 recorded, "An individual resident may self-administer medications as indicated to do so by their physician/mid-level practitioner. The nurse, resident, physician/mid-level, and resident's family must determine that this is a safe practice. The nurse must conduct a self-administration of medication assessment annually, per significant change in condition or if medication compliance is not met." The facility failed to ensure a licensed nurse performed an assessment annually for R369 and R615, who self-administered some of their medications.	S3175		
S3186 SS=D	26-41-205 (b) Administration of Selected Medications (b) Administration of select medications. Any resident who self-administers medication may select some medications to be administered by a licensed nurse or medication aide. The negotiated service agreement shall reflect this service and identify who is responsible for the administration and management of selected medications. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(b) The census totaled 6 residents, with 3 included in the sample. Based on record review and	S3186		

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S3186	Continued From page 4	S3186		

interview, Operator/Licensed Nurse (LN) A failed to ensure Resident (R) 369's Negotiated Service Agreements identified that the resident chose to self-administer some of his medications and/or the facility staff would administer the residents some of their medications.

Findings included:

- The "Resident Roster" obtained on 06/15/22 from Operator/ LN A failed to identify residents who self-administered their medications.

Review of R369's "Medical Record" revealed he admitted to the facility on 08/25/21 with diagnoses of heart failure, chronic obstructive pulmonary disease, type 2 diabetes mellitus without complications, chronic kidney disease, polyneuropathy, hypertension, atherosclerotic heart disease, hyperlipidemia, hypothyroidism, insomnia and gout.

R369's current "Functional Capacity Screen" dated 08/25/21 identified the resident required physical assistance with management of his medications or medical treatments.

R369's current "Negotiated Service Agreement/Health Care Service Plan" dated 08/25/21 identified staff set up medications for AM and PM.

Review of R369's medical record on 06/15/22 failed to include a "Self-Administration Assessment" for medications.

R369's current June 2022 "Medication Administration Record" (MAR) identified the following medication as "unsupervised": "Systane Complete Solution instill 2 drops in both eyes at

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S3186	Continued From page 5 bedtime for dry eyes." During an electronic interview on 06/16/22 at 9:03 AM, Operator/LN A confirmed R 369's current negotiated service agreement did not identify he self-administered some medications, and the facility staff administered the rest. Operator/LN A failed to ensure R369's negotiated service agreement identified the resident chose to self-administer some of his medications and who was responsible for administration of the rest of his medications.	S3186		