STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N046072	A. BUILDING: _____ B. WING _____	04/23/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUNRISE ASSISTED LIVING OF LEAWOOD	11661 GRANADA AVENUE LEAWOOD, KS 66211

(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 a resurvey with complaint investigations 136887, 139972, and 139966 at the above named assisted living facility conducted on 4-15-19, 4-17-19, 4-18-19, 4-22-19 and 4-23-19.	S 000		
S3215 SS=E	26-41-205 (h) Medication Storage (h) Storage. Licensed nurses and medication aides shall 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. (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	S3215		

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

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S3215	Continued From page 1 expiration. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(h) The facility reported a census of 92 residents (50 assisted living residents and 42 memory care residents). The sample included 6 residents, 1 focus review resident and 2 closed record reviews. Based on observation and interview for all residents and staff requiring tuberculosis skin testing, the licensed nurses and medication aides failed to ensure all medications and biologicals are stored in accordance with each manufacturer's recommendations. Findings included: - Observation of second floor medication room on 3-15-19 at 3:42 pm with administrative nurse C revealed the following: small refrigerator with 1/2-full bottle of TB (tuberculosis) skin testing solution dated as opened on 3-1--19. Interview on 3-15-19 at 3:42 pm with Administrative Nurse C stated he/she was unsure of when the solution was last used and felt it should be fine for 60 days. Upon reading side of box which stated "Once entered, vial should be discarded in 30 days, confirmed the solution should have been discarded. Manufacturer's recommendations states: "Vials in use more than 30 days should be discarded due to possible oxidation and degradation which may affect potency."	S3215		

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S3215	Continued From page 2 For all residents and staff requiring TB skin testing, the licensed nurses and certified medication aides failed to ensure TB skin testing solution was stored in accordance with the manufacturer's recommendations by discarding after 30 days.	S3215		
S3298 SS=E	26-41-206 (d) Food Preparation (d) Food preparation. Food shall be prepared using safe methods that conserve the nutritive value, flavor, and appearance and shall be served at the proper temperature. (1) Food used by facility staff to serve to the residents, including donated food, shall meet all applicable federal, state, and local laws and regulations. (2) Food in cans that have significant defects, including swelling, leakage, punctures, holes, fractures, pitted rust, or denting severe enough to prevent normal stacking or opening with a manual, wheel-type can opener, shall not be used. (3) Food provided by a resident ' s family or friends for individual residents shall not be required to meet federal, state, and local laws and regulations. This REQUIREMENT is not met as evidenced by: KAR 26-41-206(d) The facility reported a census of 92 residents (50 assisted living residents and 42 memory care residents). The sample included 6 residents, 1 focus review resident and 2 closed record reviews. Based on record review and interview for	S3298		

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S3298	Continued From page 3 all residents receiving dietary services, the administrator failed to ensure food shall be prepared using safe methods that conserve the nutritive value, flavor and appearance and shall be served at the proper temperature. Findings included: - Record review on 4-15-19 at 3:03 pm of Food Temperature Records for March 2019 in the main kitchen revealed the records lacked documentation of temperatures for the following dates/meals: 3-1-19 (breakfast, lunch, dinner); 3-4-19 (lunch); 3-9-19 (breakfast lunch dinner); 3-11-19 (dinner); 3-13-19 (lunch); 3-15-19 (breakfast, lunch); 3-16-19 (lunch); 3-18-19 (lunch); 3-19-19 (lunch); 3-20-19 (lunch); 3-24-19 (breakfast, lunch); 3-29-19 (lunch). - Record review of Food Temperature Records for April 2019 in the main kitchen revealed the records lacked documentation of temperatures for the following dates/meals: 4-1-19 (lunch, dinner); 4-2-19 (dinner); 4-3-19 (dinner); 4-4-19 (lunch); 4-6-19 (breakfast, lunch, dinner); 4-7-19 (lunch); 4-10-19 (breakfast, lunch); 4-12-19 (lunch, dinner). The facility policy for Temperature of Foods stated: "The temperatures of all food served to the residents are checked before service begins. 1. The dining services coordinator or assigned designee checks the temperature of food 15 minutes before service begins. 2. Record the temperature on the Production Worksheet. 3. If the temperature of hot food is not 150 degrees Fahrenheit, reheat the food to at least 165 degrees Fahrenheit for 1 minute before serving. Interview on 3-15-19 at 3:03 pm with Dietary Staff	S3298		

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S3298	Continued From page 4 B confirmed the food temperature records lacked documentation of temperatures for the above meals on the above dates. For all residents receiving dietary services, the administrator failed to ensure food shall be prepared using safe methods that conserve the nutritive value, flavor and appearance and shall be served at the proper temperature.	S3298		