STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N105014	A. BUILDING: _____ B. WING _____	C 01/25/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DELAWARE HIGHLANDS ASSISTED LIVING	12600 DELAWARE PARKWAY KANSAS CITY, KS 66109

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S 000	INITIAL COMMENTS The following citations are the result of a licensure resurvey with complaint investigations 84621, 85018, 90373, 91048, 91435, 94791 conducted at the above named assisted living facility on 1/19/16, 1/20/16, 1/21/16 and 1/25/16.	S 000		
S3200 SS=E	26-41-205 (d) (1-2) Facility Administration of Medications (d) Facility administration of resident ' s medications. If a facility is responsible for the administration of a resident ' s medications, the administrator or operator shall ensure that all medications and biologicals are administered to that resident in accordance with a medical care provider ' s written order, professional standards of practice, and each manufacturer ' s recommendations. The administrator or operator shall ensure that all of the following are met: (1) Only licensed nurses and medication aides shall administer and manage medications for which the facility has responsibility. (2) Medication aides shall not administer medication through the parenteral route. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(d) The facility reported a census of 114 residents. The sample included 6 residents and 4 focus record reviews. Based on record review, observations and interviews, for 3 of 10 residents sampled and all residents on the second and third floors who receive narcotic medications, the	S3200		

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

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S3200	Continued From page 1	S3200		

administrator failed to ensure that all medications and biologicals are administered to the resident in accordance with a medical care provider's written order, and professional standards of practice.

Findings included:

- Record review for resident #611 on 1/20/16 records resident admitted on 1/2/16 with diagnoses of venous insufficiency, chronic low back pain, fibromyalgia, gastroesophogeal reflux disease (GERD), coronary artery disease (CAD) and gait instability.
The functional capacity screen (FCS) dated 1/1/16 recorded resident is in need of physical assistance with medications and treatments.
The Negotiated Services Agreement (NSA) dated 1/1/16, recorded services for the facility to provide physical assistance with medications and total assistance for treatments per physicians order.

Medication administration record for 1/1/16 through 1/31/16 records the following:
Klor-con-EF 25 milliequivlant (meq) tablet (tab) (potassium supplement) takes 1 tab by mouth every day. (initialed as given 1/8/16 thru 1/19/16)
Crestor 20mg tabs (cholesterol lowering medication) take 1 tab every day, (initialed as given 1/8/16 thru 1/20/16)
Miralax Powder 17 grams in 8 ounces water every day as needed (laxative) (none given)
Fiber well fit tabs over counter daily vitamin supplement) (none given)
Metronidazole 500 milligram (mg) (antibiotic) twice a day for 14 days, bacterial infection 12/31/15 (initialed as given 1/7/16 thru 1/15/16)
Ciprofloxacin 500mg one twice daily (antibiotic) for 14 days, bacterial infection 12/31/15. (initialed as given 1/7/16 thru 1/17/16)

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S3200	Continued From page 2 Record review of physician ' s orders (signed 1/14/16 by physician) records: Klor-Con-EF 10 meq 1 tab orally twice a day. Crestor 10mg 1 tab orally once a day. No orders listed for Miralax or fiber well fit tabs. Review of nursing progress notes dated 1/7/16 at 5pm records, resident wishes for Delaware highlands to administer all her medications. Interview with licensed staff #A on 1/20/16 at 12:35pm confirms antibiotics charted as administered past completion date of 1/14/16, and confirms medication administration records and physician ' s orders do not match. Review of narcotic reconciliation records for the facility on 1/19/16 revealed the following: Resident #611, medication Fentanyl 25 micrograms/hour patch, (schedule 2 narcotic), controlled drug receipt /record/ disposition form, records 4 patches, reconciliation count with certified staff #D reveals actual count of 3 patches. Review of resident medication administration record (MAR) records this medication as given on 1/18/16. No entry for 1/18/16 on disposition form. Resident # 616, medication Clonazepam 0.5milligrams (mg) take ½ tablet by mouth every day, (schedule 4 narcotic), individual residents controlled substance record, records 19 ½ tablets with blank boxes between 1/8/16 and 1/9/16, reconciliation count with certified staff #B reveals actual count of 20 tablets. Resident # 617, medication Clonazepam 0.5mg 1 tablet by mouth 2 times daily, controlled drug receipt /record/ disposition form, records 16	S3200		

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S3200	Continued From page 3 tablets, and reconciliation count with certified staff #B reveals actual count of 15 tablets. MAR records medication given on 1/12/16 at 8pm, entry for 1/12/16 not recorded on controlled drug receipt /record/ disposition record. 1/19/2016 review of records revealed the following: Record titled: Eight hour verification of controlled substances record for January 2016, second floor, records 2 boxes lacking staff signatures; third floor, records 11 boxes lacking staff signatures. 1/20/2016 review of facility policy, " medications controlled " , reads: a count of controlled drugs is maintained by the off going and oncoming shifts. 1/19/16 at 2:55pm interview with licensed staff # A confirms above findings for residents #616 and #617, and at 4:05pm confirms above findings for resident # 611 and missing signatures on narcotic reconciliation records. For 3 of 10 residents sampled and all residents on the second and third floors who receive narcotic medications, the administrator failed to ensure that all medications and biologicals are administered to the resident in accordance with a medical care provider's written order, and professional standards of practice.	S3200		
S3250 SS=E	26-41-105 (a) Resident Records a) The administrator or operator of each assisted living facility or residential health care facility shall ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices. (1) Designated staff shall maintain the record of	S3250		

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S3250	Continued From page 4 each discharged resident who is 18 years of age or older for at least five years after the discharge of the resident. (2) Designated staff shall maintain the record of each discharged resident who is less than 18 years of age for at least five years after the resident reaches 18 years of age or at least five years after the date of discharge, whichever time period is longer. This REQUIREMENT is not met as evidenced by: KAR 26-41-105(a) The facility reported a census of 114 residents. The sample included 6 residents and 4 focus record reviews. Based on record review and interviews, for 4 residents (#611, #618, #615 and #614) and potentially affecting all residents for whom vital signs are recorded and the operator failed to ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices. - Review of record labeled: January 2016 vital signs recorded blood pressure, pulse, respirations , SPO2 (percent oxygen saturation level) and weights for most of the 114 residents living in the facility. The record lacked signatures of staff who obtained the vital signs and dates and times vital signs were taken. Record labeled ' nurses vital sign parameters ' reads: report immediately to physician blood pressure systolic greater than 210 mmhg (millimeters of mercury); diasystolic greater than over 115mmg.	S3250		

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S3250	Continued From page 5 Record review for resident #611 records resident admitted on 1/2/16 with diagnoses of venous insufficiency, chronic low back pain, fibromyalgia, gastroesophogeal reflux disease (GERD), coronary artery disease (CAD) and gait instability. Review of nursing progress notes dated 1/1/16 at 6pm records an elevated admission blood pressure of 146/100.The record lacked documentation of follow up assessment or action related to elevated blood pressure. Interview with licensed staff #A on 1/20/16 at 1:44pm confirms lack of follow-up regarding elevated blood pressure for resident #611. Review of monthly vital signs for Resident #611 revealed discrepancy in resident ' s record and January 2016 vital sign record. January 2016 vital sign record lacked resident weight; monthly vital signs documented in resident record recorded weight of 230. For resident #611, the operator failed to ensure the maintenance of a record in accordance with standards of practice Record for resident #618 with last entry in nurses notes documented on 8/26/14. Resident ' s monthly vital signs, recorded vital signs for January through July (year not recorded lacks staff signatures, dates and times of vital signs. Review of January 2016 vital sign record documented #618 ' s blood pressure as 220/102 (no date, time or staff signature). The resident ' s record lacked documentation of the January 2016 blood pressure and lacked documentation of	S3250		

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S3250	Continued From page 6 notification of the physician of the elevated blood pressure. Interview on 1/21/16 at 9:10am, licensed staff #A stated vital signs are not getting transcribed over onto each resident ' s monthly vital sign record. He/she confirms resident # 618 elevated blood pressure was not reported or followed up on, vital sign records lack signatures, dates and times of entries, and a confirmed no nurses notes for #618 documented since 8/26/14. For resident #618, the operator failed to ensure the maintenance of a record in accordance with standards of practice. Further comparison of the January 2016 vital sign record with resident monthly vital sign record revealed the following discrepancies: - Resident # 615 January 2016 vital sign record: Blood pressure (BP) 144/84, Temp (T) 97.5, resident monthly Vital sign record: BP 134/84, T 98.2. - Resident # 614, January 2016 vital sign record: BP 156/102, T 97.3, SPO2 94%, resident monthly vital sign record: BP 140/84, T 97.9, SPO2 97% On 1/21/16 at 9:55am Licensed staff #A stated she had her staff transcribe them over last night and he/she confirms vital signs for the were transcribed incorrectly. Licensed staff #A further stated they do not have a vital sign policy. For resident #615 and #614 the operator failed to ensure the maintenance of a record in accordance with standards of practice. For 4 residents (#611, #618, #615 and #614) and	S3250		

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S3250	Continued From page 7 potentially affecting all residents for whom vital signs are recorded and the operator failed to ensure the maintenance of a record for each resident in accordance with accepted professional standards and practices.	S3250		