STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N028003	A. BUILDING: _____ B. WING _____	09/09/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE HOMESTEAD OF GARDEN CITY	2414 N HENDERSON DR GARDEN CITY, KS 67846

(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 are the result of a Licensure Resurvey at the above named Assisted Living in Garden City, Kansas on 9/01/15, 9/02/15, 9/03/15, 9/08/15, 9/09/15, and 9/10/15. Complaints #85846 and #88663 also investigated.	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 census equalled 30 the sample included three Residents and four focused reviews completed. The facility identified 25 Residents with facility managed medications. Based on interviews and reviews of records, for two of three	S3200		

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

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S3200	Continued From page 1 sampled (#187 and #185), the Operator failed to ensure all medications and biologicals administered to Residents in accordance with a medical care provider's written order and in accordance with professional standards of practice. Findings included: - Review of record revealed #185 admitted to facility 8/10/15 with diagnoses of Frontal lobe dementia, Dyslipidemia, and Dysphagia. Current 8/10/15 functional capacity screen (FCS) assessed #185 unable to perform medications and treatment management. Current 8/10/15 negotiated service agreement (NSA) documented facility staff to provide medication management. A comparison of the current September 2015 medication administration record (MAR) with current signed physician's orders revealed discrepancies: Per MAR - Simvastin 40mg one po at HS (bedtime); per 8/10/15 admission orders, this medication discontinued as of 8/10/15. The August 2015 and September 2015 MAR's each documented daily administration of the Simvastin. Per MAR - Omega 3 Fish Oil two po (by mouth) every morning; per 8/13/15 re-admission orders Omega-3 Fatty Acids 1000mg (milligrams) two caps po every day. The MAR lacked the ordered dosage. Per MAR - Pantoprazole 20mg two po daily; per 8/13/15 re-admission orders Pantoprazole 20mg one po daily.	S3200		

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S3200	Continued From page 2 Per admission orders of 8/10/15 - Motrin 200mg one po every 6-8 hours for pain or temp > 100; the MAR lacked this order. Per admission orders of 8/10/15 - Robitussin DM one-two teaspoons every 4 hours PRN (as needed) cough; the MAR lacked this order. Per admission orders of 8/10/15 - Geodon 20mg IM (intramuscularly) PRN severe agitation; the MAR lacked this order. Per admission orders of 8/10/15 - Tylenol 325mg one-two tabs every four hours PRN pain/temp >100; the MAR lacked this order. Per admission orders of 8/10/15 - Ativan Polgel 1mg/ml (milliliters) every 4 hours PRN severe agitation; the MAR lacked this order. Per admission orders of 8/10/15 - Non-Alcoholic Beer use as directed; the MAR lacked this order. On 9/03/15 at 2:20pm, Resident Care Coordinator (RCC) #F confirmed the MAR did not match all currently signed physician's orders... stated I missed the Simvastin... #185 has been getting that when it was to be DC'd (discontinued) 8/10/15... the Motrin, Geodon, Non-Alcoholic beer, Ativan Plogel, and Tylenol not put on MAR from admission orders, because they didn't bring a supply of these medications with them... I just put the meds they had with them on the MAR... The Operator failed to ensure all medications and biologicals administered to #185 in accordance with a medical care provider's written order and in accordance with professional standards of practice. - Review of record revealed #187 admitted to facility 4/27/13 with diagnoses of Personal history of falls, Muscle weakness, Dysphagia, Oropharyngeal, Cardiovascular accident, and	S3200		

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S3200	Continued From page 3 Difficulty in walking. Current FCS of 5/27/15 assessed #187 unable to perform medication and treatment management. Current 5/27/15 negotiated service agreement (NSA) documented facility staff to provide medication management. A comparison of the current September 2015 medication administration record (MAR) with current signed physician's orders revealed discrepancies: 8/07/15 physician's order for Metoprolol Succinate 25mg (milligrams) extended release two times daily; the MAR documented Metoprolol Tartrate (short acting) 25mg two times daily 8/07/15 physician's order for Ipratropium Bromide 0.05% one spray both nostrils two times daily; the MAR lacked this medication order. The Operator failed to ensure all medications and biologicals administered to #187 in accordance with a medical care provider's written order and in accordance with professional standards of practice.	S3200		
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	S3215		

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S3215	Continued From page 4	S3215		

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:
KAR 26-41-205(h)

The census equalled 30 the sample included three Residents, and four focused reviews completed. The facility identified 25 Residents with facility managed medications. Based on observations and interviews, for three of three sampled (#189, #187, and#185), and for all Residents with medications managed by facility, the Licensed Nurses and Certified Medication Aides (CMA) failed to ensure that all medications and biologicals were stored in a locked medication room, cabinet, or cart, not accessible

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S3215	Continued From page 5 to anyone not authorized to administer medications. Findings included: - By observations on 9/01/15 from 4:10pm to 4:40pm, the main medication storage room door stood propped open. This door way, located behind the main nursing desk near entrance to facility determined to not be in visual filed of a licensed nurse or Certified Medication Aide at intervals during the time of this observation. At 4:20pm, Certified Medication Aide (CMA) #G went to the dining room from the desk to question non-sampled #186 about a self reported fall. The Surveyor remained standing near the desk, and an individual who identified self as "the cook" #I was seated at the desk. At 4:34pm Certified Nurse Aide (CNA) #H walked by desk... informed by cook of #186's fall... instructed to get vital signs by CMA #G... also in and around the front desk area in the absence of #G to retrieve the blood pressure cuff and other items needed for vital signs. The propped open medication room door allowed one to see the unlocked medication cart and various unlocked medication cabinets from the door way. On 9/01/15 at 4:40pm, CMA #G entered still open medication room with Surveyor... #G stated yes the door is to be closed at all times and the cart locked... confirmed the open cabinets had various medications and biologicals both prescription and over the counter preparations. The Licensed Nurses and CMA's failed to ensure that all medications and biologicals for Residents with medication management were stored in a locked medication room, cabinet, or cart, not accessible to anyone not authorized to administer	S3215		

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S3215	Continued From page 6 medications.	S3215		
S3228 SS=F	26-41-205 (l) (3) Medication Regimen Review Record (l) (3) The administrator or operator, or the designee, shall ensure that the medication regimen review is kept in each resident ' s clinical record. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(l)(3) The census equalled 30 the sample included three Residents and four focused reviews completed. Based on reviews of records and interviews, for two of three sampled (#189 and #187), for four of four focused reviews (#188, #184, #186, and #182), and for all Residents with facility managed medications and pharmacy drug regime reviews, the Operator failed to ensure the medication regimen reviews kept in each Resident's clinical record. Findings included: - By interview on 9/03/15 at 12:25pm, Resident Care Coordinator (RCC) #F stated the pharmacist from company used by facility completed last review of Resident records on 6/22/15... Pharmacist gave us a list of charts reviewed - a Roster... gave us nothing that would go into charts individually... RCC #F stated the same thing on 3/24/15... a roster of names and a compilation of concerns noted... then individual concerns are sent to the physician if needed for a	S3228		

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S3228	Continued From page 7 response... prior to the March review a yellow log kept in each medical record of the pharmacy reviews... By review, report from the pharmacist to the RCC #F consisted of: 1) 6/21/15 - Census Report (a list of Resident names including #187, #184, #188, #186, #189, and #180) 2) 6/21/15 - Current Resident Listing for facility with Medication Regimen Review activity between 6/01/15 and 6/21/15 (a list of Resident names including #187, #184, #186, #189, and #180) 3) 6/211/5 - Executive Summary of Consultant Pharmacist's Medication Regimen Review (compilation of statistics from the visit) 4) 6/21/15 - Psychoactive and Sedative/Hypnotic Utilization Trends (compilation of statistics from the visit) 5) 6/21/15 - Psychoactive and Sedative/Hypnotic Utilization By Resident for 6/01-21/15 (listing of Residents and specific applicable medications including #186, #189, #187, and #182) 6) 3/24/15 - Consultant Pharmacists Medication Regimen Review (recommendations created between 3/01/15 and 3/24/15 for three different Residents including #189 and #186) 7) 3/24/15 - Note to Attending Physician/Prescriber (recommendation created for physician regarding #189), lacked evidence sent to physician for consideration or response. 8) 3/24/15 - Current Resident Listing for facility with Medication Regimen Review activity between 3/01/15 and 3/24/15 (a list of Resident names) 9) 3/24/15 - Psychoactive and Sedative/Hypnotic Utilization By Resident for 3/01-24/15 (listing of Residents and specific applicable medications including #188) Review of records revealed:	S3228		

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S3228	Continued From page 8 - #189 admitted to facility 6/01/07 with diagnoses of Hyperlipidemia, Paranoid schizophrenia, Mild anemia, Type II Diabetes, Obesity, and Chronic urinary tract infection. The current FCS of 4/13/15 assessed #189 unable to perform medication and treatment management. The current negotiated service agreement (NSA) of 4/13/15 documented facility staff to manage medications. The medical record contained a 3/24/15 pharmacist drug regimen review, which included a recommendation for the physician. The record lacked documentation of this recommendation and lacked evidence of any attempt to obtain the physician's response. The medical record lacked evidence of any drug regimen reviews since 3/24/15. On 9/03/15 at 12:25pm, Resident Care Coordinator confirmed nothing in #189's record for 3/24/15 variance, and nothing in record for the 6/21/15 drug regimen review. #182 admitted to facility 10/16/12 with diagnoses of Hypertension, Chronic kidney disease, Dementia, Dyslipidemia, and Hypothyroidism. The current FCS of 02/04/15 assessed #182 unable to perform medication and treatment management. The current NSA 02/04/15 documented facility staff to manage medications. The medical record contained a 3/24/15 pharmacist drug regimen review. The medical record lacked evidence of any drug regimen reviews since 3/24/15. #187 admitted to facility 4/27/13 with diagnoses of Personal history of fall, Muscle weakness,	S3228		

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S3228	Continued From page 9 Dysphagia, Oropharyngeal, Difficulty in walking, and Cerebrovascular accident. The current FCS of 5/27/15 assessed #187 unable to perform medication and treatment management. The current NSA 5/27/15 documented facility staff to manage medications. The medical record contained a 3/24/15 pharmacist drug regimen review. The medical record lacked evidence of any drug regimen reviews since 3/24/15. #184 admitted to facility 9/15/14 with diagnoses of Hypertension, Peripheral vascular disease, Dementia, Bilateral cellulitis, Urinary tract infection, Dehydration, and Chronic lymphedema. The current FCS of 4/27/15 assessed #184 unable to perform medication and treatment management. The current NSA 4/27/15 documented facility staff to manage medications. The medical record contained a 3/24/15 pharmacist drug regimen review. The medical record lacked evidence of any drug regimen reviews since 3/24/15. #188 admitted to facility 6/09/14 with diagnoses of Edema, Depression, Anxiety, and Hypothyroidism. The current FCS of 4/27/15 assessed #188 unable to perform medication and treatment management. The current NSA 4/27/15 documented facility staff to manage medications. The medical record contained a 3/24/15 pharmacist drug regimen review. The medical record lacked evidence of any drug regimen reviews since 3/24/15. On 9/03/15 at 2:00pm, RCC #F and Operator #D	S3228		

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S3228	Continued From page 10 stated will discuss with the pharmacist... nothing in the individual record at this time to demonstrate the regime review process... confirmed this process the same for all Residents of facility with medication regime review processes... For all Residents with facility managed medications, and with pharmacist drug regimen reviews, the Operator failed to ensure the medication regimen reviews kept in each Resident's clinical record.	S3228		
S3261 SS=E	26-41-105 (f) (11) Resident Record Documentation of Incidents (f) (11) documentation of all incidents, symptoms, and other indications of illness or injury including the date, time of occurrence, action taken, and results of the action This REQUIREMENT is not met as evidenced by: KAR 26-41-105 The census equalled 30 the sample included three Residents with four focused reviews completed. Based on reviews of records and interviews, for two of three sampled (#189 and #185) and one focused review (#184), the Operator failed to ensure medical records contained documentation of all incidents, symptoms, other indications of illness or injury including the date, time of occurrence, action taken, and results of the actions. Findings included:	S3261		

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S3261	Continued From page 11 - #184 admitted to facility 9/15/14 with diagnoses of Hypertension, Peripheral vascular disease, Dementia, Bilateral cellulitis, Urinary tract infection, Dehydration, and Chronic lymphedema. The current FCS of 4/27/15 assessed #184 in need of physical assistance with bathing, dressing, toileting, mobility; unable to perform transfers, medication and treatment management; independent with eating; frequently incontinent; with short term memory impairment, falls/unsteadiness. The current negotiated service agreement (NSA) of 9/15/14 documented #184 to have these needed services provided by facility staff. The medical record contained a 7/24/15 hospital admission "History and Physical Report:" several co-morbidities... usual state of health until approximately one week ago... edema got worse... antibiotics in outpatient setting with little relief... being admitted at the request of emergency room for IV antibiotics... bilateral cellulitis... urinary tract infection... severe dehydration... acute kidney injury... hypertension... history of dementia and peripheral vascular disease with chronic lymphedema... The electronic medical record provided by facility to Surveyor lacked "Nurses' Notes" or similar progress notes. Resident Care Coordinator (RCC) #F printed the "Clinical Notes Report" for #184. Review revealed the following: 7/10/15 - 10:52am - on 7/09/15 at 2025 rang call light... on floor... stated was trying to get to toilet... RCC contacted... assisted up... physician alerted of fall... allergic to Bactrim... new order for Clindamycin... greenish drainage from left leg... This was the final entry of the Clinical Notes. The	S3261		

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S3261	Continued From page 12 medical record lacked documentation of #184's signs and symptoms experienced prior to hospitalization. The medical record lacked documentation of actions taken and Resident's response to the actions prior to hospitalization. The medical record failed to document the Resident's current location (another facility) and failed to document #184 discharged from facility. On 9/03/15 at 12:00pm, RCC #F confirmed no additional documentation available. The Operator failed to ensure the medical record for #185 contained documentation of all incidents, symptoms, other indications of illness or injury including the date, time of occurrence, action taken, and results of the actions. - Review of record revealed #185 admitted to facility 8/10/15 with diagnoses of Frontal lobe dementia, Dyslipidemia, and Dysphagia. The current 8/10/15 functional capacity screen (FCS) assessed #185 in need of supervision with bathing and dressing; independent with toileting, transfers, mobility, eating; unable to perform medication and treatment management; with occasional incontinence; with short and long term memory impairment, cognitive impairment, impaired decision making, and wandering. The current negotiated service agreement (NSA) of 8/10/15 documented #185 to have these needed services provided by facility staff. The electronic medical record provided by facility to Surveyor lacked "Nurses' Notes" or similar progress notes. Resident Care Coordinator (RCC) #F printed the "Clinical Notes Report" for #185. Review revealed the following two entries:	S3261		

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S3261	Continued From page 13 8/11/15 - 11:03am - came in ambulatory... alert... movement disorder... spouse reports needs a puree diet... was seated in dining room at 1715 prior to supper and had coffee... at 18:12 RCC received call from certified medication aide (CMA) reporting that Resident choked on soup... face red and lips bluish... might have passed out for a few moments... performed Heimlich maneuver 2-3 times and able to get some food particles up... still raspy, moist breathing... responsive... eyes rolled up... Oxygen saturation 52%... instructed CMA to call EMS (emergency medical service)... arrived 18:20... transported to hospital... at 19:21 family stated emergency room staff had gotten quite a bit of food particles up... was admitted to hospital... 8/17/115 - 10:11am - has been doing well since return from hospital... reminders and cues... no further episodes of choking... swallow evaluation done... wanders about... easily directed... plays piano... only tried to go out front door once this weekend... staff redirected to go out into enclosed courtyard... The medical record lacked documentation of the date and time of Resident's return to facility and condition or status of Resident upon return, in accordance with standards of practice. On 9/02/15 at 4:00pm RCC #F confirmed the medical record lacked documentation of #185's return to facility from hospital, and status or condition upon return. The Operator failed to ensure the medical record for #185 contained documentation of all incidents, symptoms, other indications of illness or injury including the date, time of occurrence, action taken, and results of the actions.	S3261		

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	N028003	A. BUILDING: _____ B. WING _____	09/09/2015

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S3261	Continued From page 14 - Review of record revealed #189 admitted to facility 6/01/07 with diagnoses of Hyperlipidemia, Paranoid schizophrenia, Mild anemia, Type II Diabetes, Obesity, and Chronic urinary tract infection. The current 4/13/15 functional capacity screen (FCS) assessed #189 in need of physical assistance with bathing; supervision with dressing and toileting and transfers; independent with transfers, mobility, and eating; unable to perform medication and treatment management; with incontinence; with short and long term memory impairment, cognitive impairment, impaired decision making, and falls/unsteadiness. The current negotiated service agreement (NSA) of 4/13/15 documented #189 to have these needed services provided by facility staff. The electronic medical record provided by facility to Surveyor lacked "Nurses' Notes" or similar progress notes. Resident Care Coordinator (RCC) #F printed the "Clinical Notes Report" for #189. Review revealed the following: No Nurses' Notes or clinical notes since 02/15/15, prior to last Resurvey in facility March 2015. The physician order section of record contained multiple "Physician Appointment Forms" with new orders and instructions: 8/20/15 - Draw Chem 8 and HgA1c with next CBC and send to me 7/06/15 - Increase Sertraline 150mg (milligrams) by mouth daily 5/12/15 - Change Oxygen to night time only On 9/03/15 at 12:00pm, RCC #F confirmed the medical record lacked documentation of these	S3261		

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S3261	Continued From page 15 appointments and resulting new orders. The Operator failed to ensure the medical record for #189 contained documentation of all incidents, symptoms, other indications of illness or injury including the date, time of occurrence, action taken, and results of the actions.	S3261		
S3290 SS=E	26-41-206 (a) (b) Dietary Services (a) Provision of dietary services. The administrator or operator of each assisted living facility or residential health care facility shall ensure the provision or coordination of dietary services to residents as identified in each resident ' s negotiated service agreement. If the administrator or operator of the facility establishes a contract with another entity to provide or coordinate the provision of dietary services to the residents, the administrator or operator shall ensure that entity ' s compliance with these regulations. (b) Staff. The supervisory responsibility for dietetic services shall be assigned to one employee. (1) A dietetic services supervisor or licensed dietician shall provide scheduled on-site supervision in each facility with 11 or more residents. (2) If a resident ' s negotiated service agreement includes the provision of a therapeutic diet, mechanically altered diet, or thickened consistency of liquids, a medical care provider ' s order shall be on file in the resident ' s clinical record, and the diet or liquids, or both, shall be prepared according to instructions from a medical care provider or licensed dietitian.	S3290		

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S3290	Continued From page 16 This REQUIREMENT is not met as evidenced by: KAR 26-41-206(a)(b) The census equalled 30 the sample included three Residents with four focused reviews completed. The facility identified all Residents as receiving meal service. Based on interviews, and reviews of records for two of two sampled with physician ordered mechanically altered diets (#187 and #185), the Operator failed to ensure the diet prepared according to instructions from a medical care provider or licensed dietician. Findings included: - On 9/01/15 at 5:50pm in the kitchen of facility, kitchen staff #I prepared and served a white soup like liquid in cereal bowls. Upon inquiry to menu, #I stated this is "pureed tuna salad... for #185 and #187"... #I stated unable to find written directions for mechanically altered diets... would ask the head cook in the morning where those directions were kept By observation, #187 pushed bowl aside and did not eat white soup mixture identified as pureed tuna salad. On 9/02/15 at 10:50am, Dietary Service Manager (DSM) #K stated I know we have physician's orders to puree... that means no lumps... no directions from Dietician or Dr. at this point... Dietician printed out menus and recipes... at the time these printed only had mechanical soft... Dietician said to chop up and add gravy... #187 is 50/50 Mechanical Soft/Puree... I work with him/her daily with what's on the menu. DSM #K stated new employees are trained on how to	S3290		

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S3290	Continued From page 17	S3290		

prepare me showing them...I have done it for years... I have the training in my head... use thickener and butter and milk... don't use water to puree stuff... our Dietician comes about every two to three months...

On 9/02/15 at noon meal service, #187 received scalloped potatoes, and a serving of ground meat with brown gravy, piece of chocolate cream pie. #185 received pureed portions of scalloped potatoes, meat, vegetable, chocolate pie.

On 9/02/15 at 1:30pm DSM #K stated I have the menus now printed off with recipes included for puree... stated I was confused... thought I had to wait for specific different consistencies but that is just for liquids... pureed is just pureed for food... confirmed no signed directions for pureed or mechanical soft diet but dietician had signed off on some of the daily menu recipes.

Review of record reveled #187 admitted to facility 4/27/13 with diagnoses of Personal history of fall, Muscle weakness, Dysphagia, Oropharyngeal, Difficulty in walking, and Cerebrovascular accident.
The current functional capacity screen (FCS) of 5/27/15 assessed #187 in need of supervision with eating.
The medical record contained a 6/09/15 Diet order 50% Mechanical Soft/50% Pureed
The current 5/27/15 negotiated service agreement (NSA) documented Resident to receive a Pureed Diet.

Review of record revealed #185 admitted to facility 8/10/15 with diagnoses of Frontal lobe dementia, Dyslipidemia, and Dysphagia.
The current 8/10/15 FCS assessed #185 independent with eating.

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S3290	Continued From page 18 The current 8/10/15 NSA documented #185 to received Pureed Diet. The medical record contained an 8/07/15 physician's order for a Pureed Diet. The Operator failed to ensure for #187 and #185, the physician ordered therapeutic diets prepared n accordance with directions from a physician or a dietician.	S3290		