STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	B040001	A. BUILDING: _____ B. WING _____	02/23/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COMFORTCARE HOMES OF HARVEY COUNTY LLC	1504 TERRACE DRIVE NEWTON, KS 67114

(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 of the above home plus facility on 2/19/15 and 2/23/15.	S 000		
S5313 SS=E	26-42-205 (g) (3) Over the counter medication (g) (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 26-42-205(g)(3) The facility reported a census of 5 residents. The sample included 3 residents. Based on record review, observation, and interview for 3 (#100, #200, and #300) of 3 residents sampled, the operator failed to ensure a licensed pharmacist or a licensed nurse placed the full name of the resident on the over-the-counter medication packaging. Findings included: - Record review for residents #100, #200, and #300 revealed the facility managed medications	S5313		

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

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S5313	Continued From page 1 for each resident. At 3:15 p.m. on 2/19/15 certified medication aide (CMA) #B unlocked the medication cart and removed the following over-the-counter medications: One bottle of acetaminophen (over-the-counter pain reliever) that lacked a resident name. CMA #B stated the medication belonged to resident #100. Herb-lax (laxative) with a resident's first name and initial of last name (resident #100). Halls cough drops that lacked a resident name. CMA #B stated the cough drops belonged to resident #300. Fleets enema, 2 boxes with the first name only of resident #200. CMA #B stated the person who opened the medication container placed the resident's name on the container. CMA #B stated CMAs and licensed nurses labeled over-the-counter medication containers. For residents #100, #200, and #300, the operator failed to ensure a licensed pharmacist or a licensed nurse placed the full name of the resident on the over-the-counter medication packaging.	S5313		
S5315 SS=E	26-42-205 (h) Medication Storage (h) Storage. Licensed nurses and medication aides shall ensure that all medications and biologicals are securely and properly stored in	S5315		

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S5315	Continued From page 2 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 home in a locked medication room, cabinet, or medication cart. Licensed nurses and medication aides shall store controlled medications managed by the home 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 home. (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 26-42-205(h)(1) The facility reported a census of 5 residents. The sample included 3 residents. Based on interview, observation, and record review for 3 (#100, #200, and #300) of 3 residents sampled and 1	S5315		

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S5315	Continued From page 3	S5315		

non-sampled resident (#400), the licensed nurse failed to ensure that overstock medications and medications to be returned to the pharmacy were stored in a locked closet and that only licensed nurses and certified medication aides had access to the medications.

Findings included:

- At 10:35 a.m. on 2/19/15, opened a closet in the kitchen and observed medication bubble packs and medication packages. Licensed nurse #A stated these were resident overstock medications or medications to be returned to the pharmacy.

Observed in the closet:

Resident #100--1 bubble pack of 3 milligram (mg) tablets of warfarin (anti-coagulant), 1 bubble pack of 5 mg tablets of warfarin, 1 bubble pack of 1 mg warfarin tablets, and 1 bubble pack of furosemide (diuretic) one-half tablets of 40 mg.

Resident #200--1 bottle of nystatin (anti-fungal) oral suspension and 1 box of albuterol breathing treatment vials.

Resident #300--1 bubble pack of warfarin 4 mg tablets, 1 bubble pack of warfarin 1 mg tablets, 1 bubble pack of warfarin 3 mg tablets, and 1 bubble pack of warfarin 5 mg tablets.

Resident #400--1 bubble pack of amlodipine (anti-hypertensive) 5 mg tablets and 1 bubble pack of atenolol (anti-hypertensive) 100 mg one-half tablets.

Record reviews for residents #100, #200, and #300 revealed the facility managed medications

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S5315	Continued From page 4 for each resident. According to the resident roster resident #400 did not self-administer medications. At 10:50 a.m. on 2/19/15, the house supervisor opened the closet door and locked the door. For residents #100, #200, #300, and #400, the licensed nurse failed to ensure that overstock medications and medications to be returned to the pharmacy were stored in a locked closet and that only licensed nurses and certified medication aides had access to the medications.	S5315		