STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N087043	A. BUILDING: _____ B. WING _____	C 02/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARRINGTON AT CHERRY CREEK	8200 E PAWNEE ST WICHITA, KS 67207

(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 citation represents the findings during an Abbreviated Complaint Survey for complain investigations 183901, 184535, 184559, 184927, 185162, 185460, 185462, and 185504 for the above named Assisted Living Facility conducted on 02/06/24 and 02/07/24.	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 '	S3215		

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

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S3215	Continued From page 1 s or pharmacy provider ' s recommended date of expiration. This REQUIREMENT is not met as evidenced by: KAR 26-41-205(h)(1) The facility reported a census of 97 residents (R). Based on observation and interview the executive director failed to ensure all medications and biologicals managed by the facility were kept in a locked medication room, cabinet, or medication cart with only licensed nurses and medications aides having access to the stored medications and biologicals. Findings included: - Observation on 02/06/24 at 10:05 AM surveyor walked past the medication room where residents went to get their medications on the second floor. There were no staff in the room and in the area where the medication carts and treatment carts were kept there were two carts that were not locked. Observation of the unlocked brown cart revealed the following: In the top drawer of the brown cart included eight tubes of "Voltaren" gel each with a different resident name including R4, R8, and R11. There were three bottles of "Aspercream" with lidocaine, two tubes of "Icy Hot" and box of fluticasone propionate and salmeterol inhalation powder for R11. The drawer contained other types of medicated creams for different residents.	S3215		

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S3215	Continued From page 2	S3215		

The second drawer had five bottles of polyethylene glycol 3350 (laxative), 12 different boxes of breathing treatments for multiple residents, and two bags of "Lokelma" (electrolyte depleter) for R12.

The third drawer had 71 prefilled prescription and non-prescription medication cards including Lisinopril (antihypertensive), Seroquel (antipsychotic), Buspirone (antianxiety), Acetaminophen, Gabapentin (anticonvulsant) as well as many other medications. There were two insulin pens, "Glargine" and "Novolog" for R15.

The bottom drawer contained different medical supplies.

The unlocked gray cart with red trim contained medicated creams in the top drawer including "Voltaren"" gel (for pain), and other ointments. The third drawer contained eight bottles of polyethylene glycol 3350 and multiple boxes of breathing treatments, "Albuterol" and "Proventil."

On 02/06/24 at 10:40 Am Certified Medication Aide C came into the medication room and reported she did not have keys to those carts, but thought they were supposed to be locked.

On 02/06/24 at 11:10 AM Licensed Nurse B acknowledged staff were to lock the medication carts and treatment carts anytime they walked away from them.

Review of the Medication Management /Storage of Medications Policy and Procedure revealed all drugs managed by the facility shall be stored safely, securely and properly following manufacturer's recommendations and state laws and regulations. They will be stored in a locked

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S3215	Continued From page 3 medication cart and only those persons authorized to administer medications shall have access to carts. The executive director failed to ensure a staff using the Medication/Treatment Carts kept them locked to ensure only a licensed nurse or medication had access to the stored medications and biologicals in the cart.	S3215		