STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	N089066	A. BUILDING: _____ B. WING _____	06/11/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOME OF THE FLINT HILLS 3	518 E LAKELAND DR SILVER LAKE, KS 66539

(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 the licensure resurvey with attached complaint numbers 188379, 187356, 186752, and 184377, for the above named facility conducted on 06/10/24 and 06/11/24.	S 000		
S3215 SS=F	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: K.A.R. 26-41-205 (h) The facility reported a census of 8 residents. The sample include 3 "Residents" (R)'s, and 3 focused review residents. Based on observation and interview the Operator failed to ensure the "Licensed Nurse's" (LN)'s and the "Certified Medication Aides'" (CMA)'s stored the controlled medications managed by the facility in a separately locked compartment within a locked medication room, cabinet, or cart. The operator further failed to ensure only the licensed nurse or medication aide had access to the controlled medications. Findings included: - Observation on 06/11/24 at approximately 02:00 PM of the video footage provided to the department revealed the following: On 04/15/24 at 05:45 AM CMA A Removed a box containing a bottle of Morphine from a locked unit in the medication room, when she left the room at 05:46 AM the unit that contained the controlled medications was left open, and the opened bottle of morphine was left on the counter. On 04/15/24 at 05:52 AM CMA A returned to the medication room. On 04/15/24 at 05:54 CMA A left the medication room again and the unit that contained the controlled medications remained open.	S3215		

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S3215	Continued From page 2 On 04/15/24 at 06:00 AM CMA A returned to the medication room. On 04/15/24 at 03:16PM CMA A removed from the locked unit where the controlled medications are kept a bottle of Morphine and a card of individually separated pills, and from the blue binder pages of paper. On 04/15/24 at 03:19 PM CMA A entered the front office with the medications she removed from the locked units in the medication room and laid the medications on the corner of the desk closest to the window on the right-hand side of the desk. On 04/15/24 at 03:20 PM CMA A left the office, and the medications were left on the corner of the desk. On 04/15/24 at 03:20 PM CMA A returned to the office. On 04/14/24 at 03:22 PM CMA A left the office and, the medications were left on the corner of the desk. On 04/15/24 at 03:22 PM CMA A returned to the office. On 04/15/24 at 03:34 PM CMA A left the office and, the medications were left on the corner of the desk. On 04/15/24 at 03:41 PM CMA A returned to the office. On 04/15/24 at 03:44 PM CMA A left the office and, the medications were left on the corner of the desk.	S3215		

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S3215	Continued From page 3 On 04/15/24 at 03:46 PM CMA A returned to the office. On 04/15/24 at 03:48 PM CMA A left the office and, the medications were left on the corner of the desk. On 04/15/24 at 03:49 PM CMA A returned to the office. On 04/15/24 at 03:49 PM CMA A picked up her backpack and the medications and went towards the office door, she then laid the medications down on the left front corner of the desk. On 04/15/24 at 03:50 PM CMA A left the office, and the medications are on the front left corner of the desk. On 04/15/24 at 03:51 PM CMA A returned to the office. On 04/15/24 at 03:51 PM CMA A picked up the medications and left the office. On 04/17/24 at 01:40 PM facility staff opens the unit where the controlled medications are stored and took out a bottle of morphine, she then left the medication room at 01:41 PM with a syringe in her hand. the Bottle of morphine had been placed back in the box and left on the counter. On 04/17/24 the staff member returned to the medication room, leaving the keys to the unit that contained the controlled medications on the blue binder on the counter. On 04/17/24 at 01:38 PM CMA A handed a facility staff member a box of Morphine from the left side	S3215		

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S3215	Continued From page 4 of the desk. On 04/17/24 at 04:21 PM CMA A entered the medication room picked the keys up from the blue binder and opened the unit where the controlled medications are stored. She then removed a box of morphine from the refrigerator and removed several pages from the blue binder, she counted 6 cards of medications that she placed in a small open toped box, there appeared to be three boxes of liquid medication one of which was the bottle of morphine that was removed from the secured unit. She removed another box from the drawer of medications under the counter and placed a total of four boxes of oral medications in the opened top box. She left the medication room at 04:25 PM On 04/17/24 at 04:26 PM CMA A entered the office and placed the box of medications she removed from the secured units in the medication room on the left corner of the desk. On 04/17/24 at 04:28 PM CMA A walked out of the office and left the box of medications on the left corner of the desk. On 04/17/24 at 04:34 PM CMA a returned to the office. On 04/17/24 at 04:45 PM CMA A walked out of the office and left the box of medications on the left corner of the desk. On 04/17/24 at 04:47 PM CMA A returned to the office with R2 with her, she sat R2 in the chair by the window. On 04/17/24 at 05:02 PM CMA A walked out of the office, R2 remained in the chair by the	S3215		

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S3215	Continued From page 5 window, and the medications continued to sit in the box on the left corner of the desk. On 04/17/24 at 05:05 PM CMA A returned to the office. On 04/17/24 at 05:08 PM CMA left the office with the box of medications that had been sitting on the left front corner of the desk, a staff member came in and assisted R2 out of the room. Interview on 06/11/24 with LN B, and Operator C and LN D by phone confirmed they had been made aware of the concerns of the handling of the controlled medications. They stated that they had a resident who had been on morphine and the family wanted the morphine discontinued. The resident was in the dying process, so the decision was made for the medication to be transported to the main office in a neighboring town, so the medication could be destroyed by two nurses. Operator C continued that the family wanted the morphine restarted so CMA A transported the morphine back to the facility. They confirmed the controlled medications were not in a locked unit. The Operator failed to ensure the LN's and the CMA's stored the controlled medications managed by the facility in a separately locked compartment within a locked medication room, cabinet, or cart. The operator further failed to ensure only the licensed nurse or medication aide had access to the controlled medications.	S3215		
S3295 SS=F	26-41-206 (c) Dietary Services Menus (c) Menus. A dietetic services supervisor or licensed dietitian or, in any assisted living facility or residential health care facility with fewer than	S3295		

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S3295	Continued From page 6 11 residents, designated facility staff shall plan menus in advance and in accordance with the dietary guidelines adopted by referencein K.A.R. 26-39-105. This REQUIREMENT is not met as evidenced by: K.A.R. 26-41-206 (c)(1) The facility reported a census of 8 residents. The sample include 3 "Residents" (R)'s, and 3 focused review residents. Based on observation and interview the Operator failed to ensure the menu plans were available to each resident on at least a weekly basis. Findings included: - Observation on 06/10/24 at approximately 11:30 AM, the dining area lacked the availability of the menu plans for the week. Interview on 06/10/24 with "Certified Medication Aide" (CMA) A confirmed the menu plans for the week were not posted. She stated she and the residents had a meeting and she was working on revising the menus, and she had not finished them at the time of the survey. The Operator failed to ensure the menu plans were available to each resident on at least a weekly basis.	S3295		

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S3298	Continued From page 7	S3298		
S3298 SS=F	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: K.A.R. 26-41-206 (d) The facility reported a census of 8 residents. The sample include 3 "Residents" (R)'s, and 3 focused review residents. Based on observation and interview the Operator failed to ensure the meals were prepared using safe methods that conserve the nutritive value and flavor. Findings included: - Observation on 06/10/24 at approximately 11:30 AM during the facility tour, in the refrigerator in the food preparation area were the	S3298		

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S3298	Continued From page 8 following expired food items: 1 large container of Mayo mayonnaise with an expiration date of 12/23. 1 large container of Miracle Whip with an expiration date of 11/23. Interview on 06/10/24 at approximately 11:30 AM with "Certified Medication Aide" (CMA) A confirmed the container of mayonnaise and Miracle Whip had passed their expiration dates. The Operator failed to ensure the meals were prepared using safe methods that conserve the nutritive value and flavor.	S3298		
S3320 SS=F	28-39-254 CONSTRUCTION (a) The assisted living facility or residential health care facility shall be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public. (b) All new construction, renovation, remodeling and changes in building use in existing buildings shall comply with building and fire codes, ordinances and regulations enforced by city, county, and state jurisdictions, including the state fire marshal. (c) New construction, modifications and equipment shall conform to the following codes and standards: (1) Title III of the Americans with disabilities act, 42 U.S.C. 12181, effective as of January 26, 1992; and (2) "Food Service Sanitation Manual," health,	S3320		

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S3320	Continued From page 9 education, and welfare (HEW) publication no. FDA 78-2081, as in effect on July 1, 1981. This REQUIREMENT is not met as evidenced by: K.A.R. 28-39-254(a) The facility reported a census of 8 residents. The sample include 3 "Residents" (R)'s and 3 focused review residents. Based on observation and interview the Operator failed to ensure the facility was maintained to protect the safety of the residents, personnel, and the public. Findings included: - Observation on 06/10/24 at approximately 11:30 AM during the facility tour, in the southeast common area was a door that led to a secured fenced in backyard area. The door had a keypad lock in place, with two wires hanging from a hole in the wall to the right of the doorframe approximately 4 feet from the floor. Observation on 06/11/24 at approximately 01:00 PM the door that led to the secured backyard area was standing open approximately 10 inches, when the door was closed the door would not latch. Interview on 06/10/24 at approximately 11:30 AM with "Certified Medication Aide" (CMA) A confirmed the door was broken and the wires were not live. She stated the contractors had been out and she did not know the date the door was to be fixed. The Operator failed to ensure the facility was	S3320		

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S3320	Continued From page 10 maintained to protect the safety of the residents, personnel, and the public.	S3320		