

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 175126	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/14/2020
NAME OF PROVIDER OF SUPPLIER VALLEY VIEW SENIOR LIFE		STREET ADDRESS, CITY, STATE, ZIP 1417 W ASH ST JUNCTION CITY, KS 66441	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0761 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</p> <p>The facility had a census of 74 residents. The sample included 18 residents. Based on observation, record review, and interview, the facility failed to date Resident (R) 23's insulin vials when opened and discard outdated stock medications in two of four medication/treatment carts. Findings included: - On 10/08/20 at 08:30 AM, observation during initial tour of the medication cart on Heritage Hall revealed two Humalog insulin (rapid acting human hormone that regulates the level of glucose or sugar in the blood) flex pens, lacked a date when opened, and one bottle of [MEDICATION NAME] ([MEDICATION NAME] medication that reduces the effects of sneezing, itching, watery eyes, and runny nose), 10 milligram (mg), 100 tablets, expired June 2020. On 10/08/20 at 08:35 AM, Licensed Nurse (LN) I verified R23 received the insulin daily, the Humalog pen lacked a date opened, and the [MEDICATION NAME] expired June 2020. On 10/12/20 at 04:30 PM, Administrative Nurse D stated the nurses were to date the insulin pens when opened and discard expired stock medications. The facility's Medication Access and Storage policy, dated 01/15/20, documented medications are labeled in accordance with facility requirements and Kansas and Federal laws. All drug containers will be labeled, and drug labels must be clear, consistent, legible and in compliance with State and Federal requirements. There will be a standard method for appropriately and safely labeling medications dispensed to all residents. Floor stock medications are labeled floor stock or house supply and kept in the original manufacture's containers with the expiration date and a lot number clearly evident. Upon opening of insulin pens, the licensed nurse will write the date opened along with resident's name on the pen itself. The facility failed to document the date R23's Humalog flex pens opened and failed to discard expired stock medication in the medication cart, placing the residents at risk for use of ineffective medications.</p> <p>- On 10/08/20 at 09:01 AM, observation during initial tour of the Sunflower Lane medication cart revealed one bottle of Vitamin E, 400 International Units (IU), 100 soft gels, expired September 2020. On 10/08/20 at 09:05 AM, License Nurse (LN) G verified the Vitamin E soft gels were expired and the nurse should check the carts for expired medications before use. LN G replaced the Vitamin E soft gels with a new unexpired bottle. On 10/08/20 at 09:19 AM, observation during initial tour of Lilac Lane medication cart revealed Aspirin 81 milligrams (mg) and [MEDICATION NAME] Allergy Relief, 10 mg (allergy medication) were not labeled with the date opened. On 10/08/20 at 09:24 AM, LN H verified the Aspirin 181 mg and [MEDICATION NAME] Allergy Relief 10 mg bottles were not labeled with the date opened. The facility's Medication Labeling and Storage policy, dated 01/15/20 documented medications are labeled in accordance with facility requirements and Kansas and Federal laws. All drugs containers will be labeled, and drug labels must be clear, consistent, legible and in compliance with State and Federal requirements. There will be a standard method for appropriately and safely labeling medications dispensed to all residents. Floor stock medications are labeled floor stock or house supply and kept in the original manufacturers' containers with the expiration date and a lot number clearly evident. Upon opening of insulin pens, the licensed nurse will write the date opened along with resident's name on the pen itself. The facility failed to discard expired Vitamin E soft gels, and label Aspirin and [MEDICATION NAME] Allergy Relief bottles in one of four medication carts with date opened, placing the residents at risk for use of ineffective medications</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE	(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.