STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675282	A. Building B. Wing	05/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Amarillo Medical Lodge	9 Medical Dr Amarillo, TX 79106

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	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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47854 Based on observation, interview, and record review, the facility failed to ensure drugs and biologicals were stored and labeled in accordance with currently accepted professional principles for 1 (Resident #1) of 7 residents. -1 nasal medication and 2 eye drop medications were discovered on bedside table for Resident #1 The facility's failure could place all residents at risk for obtaining medications that could cause adverse reactions. Findings included: Observation/Interview on 05/07/2024 at 8:57am revealed three medications (Fluticasone (nasal spray for allergies, Therea Tears (eye drops for dry eye), and Alaway (eye drops for dry eye) were on Resident #1's bedside table. Resident #1 was asked if she could administer medications to herself, she stated that she could, but she had not used these medications this morning yet. Resident #1 was asked if these medications are supposed to be provided by nurse. Resident#1 pointed to the Fluticasone nasal spray and stated, this one is usually put up. Record review of Resident #1's face sheet, dated 05/07/2024, revealed that Resident #1 was a [AGE] year-old female who was admitted to the facility on [DATE], with the following diagnoses: Type 2 diabetes mellitus without complications (high blood sugar), hypothyroidism (thyroid underperforming), muscle weakness, cognitive communication deficit (impaired thought processes), other lack of coordination, history of falling. Record review of Resident #1's active physicians orders, dated 05/07/2024 revealed no order for the Fluticasone, Therea Tears, and Alaway medications. (continued on next page)

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

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(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	Record review of Resident #1's MDS assessment, dated 03/13/2024, revealed that Resident #1 has a BIMS (Brief Interview for Mental status) of 10, and functionality of performing oral hygiene, upper body dressing and personal hygiene at a level of set-up or independent. Toileting hygiene, shower/bathing/lower body dressing, and putting on/taking off footwear Resident #1 is dependent on staff to perform these types of ADLs. Record review of Resident #1's care plan with a revision date of 03/15/2024, revealed no information regarding having medications at bedside or self-administration of medications. In an interview on 05/07/2024 9:22am with DON stated that the facility was not allowed to go through resident's personal items upon entering the facility. DON stated that if the resident had medications in their possession, the staff wouldn't know unless the resident tells them. No negative outcome was provided during this interview. During an observation on 05/07/2024 at 9:35am revealed DON giving an unidentified CNA an in-service in the hallway regarding medications being left at bedside. During an observation on 05/07/2024 at 9:47am revealed LVN B asking unidentified resident Do you have any meds out? Upon entering the room there were was no observation of medicaitons in room of resident. In an interview on 05/07/2024 at 9:48am LVN B stated that if the resident has the order to have medications at bedside they can have them. LVN B was asked, So, the medications should be locked up and then when it is time for the meds to be given you bring them to the resident, and they can give it to themselves? LVN B stated No they can have them on their bedside table. LVN B stated that if the resident has the order for bedside meds that they can be on the bedside, most of those types of medications are creams. No negative outcome was provided by LVN B during this interview. In an interview on 05/07/2024 1:28pm LVN E stated that the meds were not on beside of Resident #1 this morning during med pass. LVN E stated that when LVN E went into resident's room to ask resident about meds. Resident #1 stated that she had them in her black bag. LVN E stated that she educated the resident on medications and that they could not be left out. LVN E stated that she would have to obtain an order for the medications and an order for resident to keep medications at bedside and that they would have to be in a cabinet or in her bag. LVN was asked what a negative outcome would be for having medications out and not put away, LVN E stated, it could lead to a write up. LVN E stated when she asked the Resident #1 if there any other medications in the resident's room, Resident #1 pulled out a white bag that contained Stool softener, Biofreeze, Biotin, and Melatonin in it. LVN E took medications and placed them in the medication cart and was getting orders for the medication, along with the Flonase and eye drops that were discovered earlier in the day. In an interview on 05/07/2024 at 1:49pm Resident #1 was asked if she had taken any of the medications that were found in her room. Resident #1 stated that she had only used the Biofreeze for her hands one night because her arthritis was acting up. No other medications had been taken by resident, per Resident #1. Record review of policy provided by facility named Medication Storing and Controlling Medications, undated, revealed the following: (continued on next page)

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F 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Policy: It is the policy of this Facility to: 1. Store medications safely, securely, and properly following manufacturer's recommendations or those of the supplier, and in accordance with federal and state laws and regulations. The medication supply is accessible only to authorized personnel. 2. Ensure maximum safety for residents. Procedure: 4. medication of those residents who do not self-administer, will be stored in a locked cabinet (such as a medication cart). Only authorized personnel will have a key/access to the locked cabinet .