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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                                  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>185302 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                                       | (X3) DATE SURVEY COMPLETED<br><br>06/14/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Hardinsburg Nursing and Rehabilitation Center |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>101 Fairgrounds Road<br>Hardinsburg, KY 40143 |  |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (X4) ID PREFIX TAG  | SUMMARY STATEMENT OF DEFICIENCIES<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)  |
| <p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 50153</p> <p>Based on observation, interview, review of facility policy, and review of manufacturer's information, the facility failed to ensure that all drugs and biologicals used in the facility were labeled in accordance with professional standards, including open/use by/expiration dates and/or resident name for at least seven (Resident (R) 39, R26, R43, R5, R34, R25, and R48) of 43 residents whose medications were observed during an audit of three of the facility's four medication carts.</p> <p>The findings include:</p> <p>Review of the facility policy, Medication Administration Standard of Practice, with a review date of ,d+[DATE], revealed, When opening a multi-dose container, the date opened shall be recorded on the container. Expired/beyond use date medication should not be administered.</p> <p>Review of the facility policy, Label / Store Drugs &amp; Biologicals Standard of Practice, last reviewed ,d+[DATE], revealed, Drugs and Biologicals must be labeled in accordance with currently accepted professional principles and include the expiration date when applicable. Further in the policy, the Protocol noted, Expired and / or discontinued medication shall be removed from the medication storage area for timely return to pharmacy and / or documented destruction .If a multi-dose vial has been opened or accessed, the vial should be dated and discarded within 28 days unless the manufacturer specifies a different date for the particular vial.</p> <p>1. Observation of the Top [NAME] medication cart on [DATE] at 8:02 AM revealed the following:</p> <p>a. R39 had one fluticasone propionate inhaler 250 mg / 50 mcg (milligram/microgram) which was dated with an open date of ,d+[DATE]. Storage instructions on the inhaler box read to Discard one month after opening the foil pouch or when the counter reads zero, whichever comes first. According to the manufacturer's instructions, the inhaler, which was still on the medication cart on [DATE], should have been discarded as it exceeded the recommended discard date of one month.</p> <p>b. One Wixela 500 / 50 inhaler, with 60 metered doses, did not have a label on the package or on the inhaler identifying the resident for whom it was prescribed. The box had the letters DS written in black ink; however, there was no open date documented.</p> <p>(continued on next page)</p> |

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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>c. Levemir 100 units/milliliter (ml), 10 ml multidose vial for R26 showed a dispense date of [DATE]. The vial was opened, with no open date documented on either the vial or the box.</p> <p>d. R43 had a compounded medication - amantadine/meloxicam/topiramate/ Gaba / Lido , d+[DATE]XXX[DATE]/5% topical cream in the cart. The label stated, Discard by [DATE].</p> <p>2. Observation of the Back East medication cart on [DATE] at 1:34 PM revealed the following:</p> <p>a. R5 had an albuterol sulfate 90 mcg / actuation inhaler which was opened with no open date found on either the box or the inhaler.</p> <p>b. R34 had fluticasone propionate 50 mcg two sprays daily for allergic rhinitis. The spray was dispensed [DATE] and was not labeled with an open date.</p> <p>c. R25 had Clearlax 17 grams by mouth daily as needed, which was dispensed [DATE]. The medication, which was opened, was not labeled with an open date.</p> <p>d. R48 had Clearlax 17 grams by mouth daily as needed, which was dispensed [DATE]. The medication, which was opened, was not labeled with an open date.</p> <p>In an interview with Licensed Practical Nurse (LPN) 1 on [DATE] at 8:31 AM, she stated the medications should have been dated and initialed when opened. Additional interview with LPN1 at 10:13 AM on [DATE] revealed the nurse who finds an expired medication should remove the medication from the cart, and the Director of Nursing (DON) office also completes audits of the medication cart as well.</p> <p>Interview with Kentucky Medication Aide (KMA) 1 and LPN1 on [DATE] at 1:55 PM confirmed that medications should be labeled by whoever opens the medication. At 2:01 PM on [DATE], LPN1 stated she thought the disposal date for inhalers was on the box for most of them and reiterated that medications should be dated and initialed when opened.</p> <p>Interview with LPN2 on [DATE] at 1:58 PM revealed inhalers should be disposed of 30 days after they are taken out of the foil and medications should be labeled by whoever opens the medication.</p> <p>Interview with the DON on [DATE] at 11:30 AM revealed medication cart audits were to be completed by the DON; however, she was not certain of the frequency this was to occur. She confirmed that her expectation was that medications past their 'beyond use' dates should be removed from the cart and the people working on the cart should address this. The DON stated it was important to label the medications and to remove the medications (when expired) as the effectiveness of the medication may be affected.</p> <p>Interview with the Administrator on [DATE] at 4:25 PM revealed it would be her expectation that medications were labeled and dated when opened and removed from the medication cart if expired to avoid a potential negative effect.</p> |  |  |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>                    | <p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 45113</p> <p>Based on observation, interview, record review, and review of the facility's policy, it was determined the facility failed to store, prepare, and serve food in a sanitary manner and in accordance with professional standards for food service safety. The sanitation handwashing area, sanitation prep sink area, and flooring were dirty/soiled and in need of cleaning. Dry spices, as well as food stored in the refrigerator and freezer were open and unsealed, unlabeled, undated, and/or past their expiration date. Scoops used for serving food were dirty with old food particles dried to them. Staff were not trained and/or were unaware of food storage requirements. This failure had the potential to affect all residents of the facility who consumed food prepared in the kitchen.</p> <p>The findings include:</p> <p>Review of the facility's [NAME] Report, last updated [DATE], revealed 59 of 59 residents received their food from the kitchen.</p> <p>1. Review of the facility's Environment policy, dated ,d+[DATE], revealed the purpose of the policy was to ensure that all food service areas would be maintained in a clean and sanitary condition. Per the policy, the Food Service Director would ensure that the physical plant would be maintained in a clean and sanitary manner, including floors, walls, ceilings, lighting, and ventilation; all employees would be knowledgeable in the proper procedures for cleaning all food services equipment and surfaces; and all food surfaces were to be cleaned and sanitized after each use. Further, per the policy, the Food Service Director would ensure that a routine cleaning schedule was in place for all cooking equipment, food storage areas, surfaces, and floors.</p> <p>Review of the undated Daily Opening/Closing Duties and Check List revealed the opening/closing dietary staff was to ensure equipment such as the toaster and robot coupe (food processor) were clean, and the sink was cleaned and drained. Further dietary duties included sweeping the floors and under all equipment were to be swept and mopped at the beginning and end of each AM (morning) and PM (night) shift.</p> <p>a. Observation during the initial kitchen tour, on [DATE] at 10:08 AM, revealed the sanitation handwashing area of the sink, and back wash was dirty with stains, hair particles, noticeable dirt and buildup around the faucet and handles. Observation of the sanitation prep sink station and surrounding counter surfaces, including the window seal above the sink and counter, revealed spatter stains, dirt with debris buildup, dust, and food particles.</p> <p>b. Observation during the initial kitchen tour on [DATE] at 10:08 AM of the Food/Utensil Storage Drawer revealed three different sized scoops that were dirty with dried, old food particles stuck to the scoop and handles.</p> <p>(continued on next page)</p> |  |  |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>                    | <p>c. Further observation on [DATE] at 11:25 AM, during tray line service, revealed the gas stove, the flat top grill, and the toaster were full of dried crumbs and food particles. The robot coupe and the remote pull station had thick oil and grease buildup on the top, sides, and front surfaces of the cooking equipment. Continued observation revealed a block of used, unrefrigerated melted butter on the countertop of the prep station with no label/date as well as a four (4) inch food stained, dirty blade knife on top of the butter case. The tile flooring in front, under, and around the sides of the stove/grill/toaster stations had thick greasy soil buildup and debris as well as old, dried macaroni noodles on the floor.</p> <p>Review of the Dietary's Daily Opening/Closing Duties and Check List for the month of [DATE], revealed no dietary staff initials were noted for the performance of different cleaning areas, only a down arrow for all the areas as well as no clean/check/log of dietary staff performance initials for any of the cleaning areas on [DATE], [DATE] and [DATE].</p> <p>During interview on [DATE] at 10:20 AM, with the Dietary Manager (DM), she stated the sink was to be cleaned throughout the day on both shifts with the expectation that the sink would be white upon cleaning. However, DM was not able to convey a clear cleaning schedule for the handwashing area and stated that due to its appearance, the DM felt it had not been cleaned per the facility's cleaning schedule. The DM asked Dietary Aide (DA) 1 during the survey team's observation of the kitchen as to when the last time she had cleaned the handwashing station, and DA1 stated not since yesterday morning.</p> <p>2. Review of the facility's Food Storage: Cold Foods policy, revised ,d+[DATE], revealed all food items would be stored wrapped or in covered containers, labeled and dated, and arranged in a manner to prevent cross contamination.</p> <p>Review of the undated Daily Opening/Closing Duties and Check List revealed dietary staff to check and ensure all food was labeled, dated, and checked for expiration date. In addition, daily duties of opening/closing dietary staff included ensuring all reach-in and walk-in refrigerators were clean, orderly, and checked for proper food storage.</p> <p>Observation during the initial tour of the kitchen conducted on [DATE] at 10:08 AM revealed foods were stored open and unsealed, unlabeled, undated and/or past their expiration date. Observations included:</p> <p>a. The dried seasoning station contained five plastic containers of 16-ounce unlabeled/undated seasonings which expired in 2020.</p> <p>b. Refrigerator 1 contained seven yogurt cups that were undated and without labels.</p> <p>c. Refrigerator 2 contained 10 bags of six cooked boiled eggs with a date of [DATE]; however, no discard date was noted on the label. One box of 15 cartons of liquid egg whites with citric acid was dated [DATE] and showed an [DATE] expiration date. One 30-ounce open jar of grape jelly had an expiration date of [DATE].</p> <p>d. Refrigerator 3 contained one box of dietary supplemental shakes with a digital expiration date of [DATE] and no open/discard date and/or label.</p> <p>(continued on next page)</p> |  |  |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>                    | <p>e. Freezer 1 contained one large, sealed bag of frozen chicken breasts, and an opened, unsealed large frozen bag of 11 freezer- burned country fried steaks. There was no open/discard date and/or label on either the chicken breast or country fried streaks.</p> <p>Interview on [DATE] at 11:00 AM with the DM revealed the refrigerators were to be checked one to two times daily per the dietary staff; however, she was unsure of the policy for how long the food items were held after being opened and/or how long it could be kept before disposal.</p> <p>3. During an interview on [DATE] at 1:15 PM with DA1, she stated she had worked in the kitchen since , d+[DATE], and her tasks included preparing desserts, drink cart and assisting the cook when her tasks were completed. When asked about training provided by the facility related to sanitation of the kitchen, she stated it had been done yesterday (after the survey had been initiated), but until then, there had been no training. She stated the 30-minute training and posttest taken the previous day covered steps to take with sanitizing the kitchen and cook area including dating the sanitation bucket and using strips to assure the mix was correct. She stated the solution for the sanitation bucket was premixed. DA1 added it was important to sanitize the kitchen area, as well as the handwashing station to prevent residents and staff from getting sick and to prevent cross contamination. DA1 also stated the training she received the previous day yesterday covered labeling of food. She stated the training stated to throw out leftovers after three days, and prior to the training, she thought the leftovers were kept longer but was unable to say for sure. When asked why it was important to discard leftovers in a timely manner and per labeling, she stated to prevent people from getting sick. She added the training included the need to note the throw away (discard) date of food.</p> <p>During an interview on [DATE] at 2:00 PM, with DA2, stated she would have worked at facility for one year in August. She stated she received sanitation training for the kitchen area by her previous boss when she first started but had not received any training since. She stated training was provided yesterday (after the above-noted observations were made by the survey team) and added she received her food handlers license at that time. She stated during her previous training, she had shadowed another kitchen staff for a couple of days. She stated the old training covered labeling and storage and used the seven-day rule. When asked what that meant, she stated when something was opened, it was labeled to throw away in seven days. She stated she was unsure which foods were to be discarded after the seven days though, but thought milk was one of them. When asked about sanitation of the kitchen area she stated the cleaning solution was placed in a red bucket to sanitize the tables and all surfaces in the kitchen adding there was a green bucket, but she was unsure the purpose of it. DA2 added the importance of sanitizing the kitchen area was to prevent cross contamination to prevent people from getting sick. She stated labeling and to follow labeling was important to prevent Salmonella and pests in the kitchen.</p> <p>(continued on next page)</p> |  |  |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>                    | <p>Interview on [DATE] at 10:08 AM and [DATE] at 2:24 PM, with the DM (who toured with the survey team), revealed each kitchen staff member was responsible for cleaning the kitchen areas of which included the handwashing station, prep stations, surfaces, and floors between equipment, under the equipment and around the equipment in their work area every day after each meal. Continued interview revealed she recently, just this week, initiated a training module to educate herself and staff on the proper sanitation, storage, labeling and dates of stored food. Per the DM, there was an opening/closing daily cleaning schedule for all staff; however, she indicated the need to start a closer tracking system to monitor and audit the checklist to ensure staff were cleaning the cooking equipment after each meal service, checking to ensure food was being labeled, dated, rotated/discarded, and implementing proper food storage of the refrigerators and freezers. Per interview, she relied on all dietary staff to ensure the kitchen was clean, sanitary and a safe environment.</p> <p>During an interview on [DATE] at 3:40 PM, the Regional Dietician (RD) stated she expected the DM and kitchen staff to ensure they followed facility policies and procedures, along with the state and federal guidelines pertaining to the kitchen. She stated she expected the staff to serve, distribute and store the food in a sanitary manner to prevent cross contamination, as well as food allergies from the transfer of food particles on dirty surfaces. The RD stated food should be sealed completely when stored, labeled and dated, and discarded after the used by date and/or expired date. In addition, the RD stated she expected staff to clean equipment as they go to ensure the health and safety of all residents.</p> <p>During an interview on [DATE] at 4:30 PM with the Administrator, she stated she expected the kitchen staff to follow facility policies and procedures, as well as the federal and state regulations, pertaining to the kitchen area. In addition, she stated it would be her expectations for the Dietary Manager and kitchen staff to follow trainings for sanitation and labeling of food and adding staff should stay up to date on trainings. She stated her concern, if the training was not followed, would be the safety and well-being of the residents.</p> |  |  |