

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 035144	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/11/2025
NAME OF PROVIDER OR SUPPLIER Peoria Post Acute and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 13215 North 94th Drive Peoria, AZ 85381	

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)
<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</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>The facility failed to ensure that one medication cart was secured when left unattended. The deficient practice could result in residents, visitors, and/or staff members having unrestricted access to medications. Findings include: An observation of a medication cart was conducted on September 11, 2025, at 12:07 p.m., with 2 surveyors present, who observed that a cart was left unattended and unlocked. An interview was conducted on September 11, 2025, at 12:09 p.m. with Registered Nurse, Staff #41, who confirmed that the cart was unlocked in the hallway. The RN Staff #41 stated that if the cart is left unlocked and unattended, people could get into the cart and get into the medications. An interview was conducted on September 11, 2025 09:00 a.m. with the Director of Nursing (DON), Staff #67, who stated that her expectations were that if a staff member was not present, medication carts should be locked and secured. The risks that present themselves are that residents have access to medications. The facility policy reviewed in November 2024, titled, Pharmacy Services Drug Storage, revealed that drugs and/or biologicals should not be left unsecured/unattended. The policy further stated that medication and treatment carts will be kept locked when unattended.</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.

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