STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	305039	A. Building B. Wing	01/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pleasant Valley Nursing and Rehab Center	8 Peabody Road Derry, NH 03038

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 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured. Based on interview and record review, it was determined that the facility failed to implement a comprehensive care plan for 1 of 3 residents reviewed for accidents in a final sample of 18 residents (Resident identifier is #26).Findings include:Review on 1/14/26 of Resident #26's care plan revealed a fall care plan with the following intervention: two person assist with all care, initiated on 12/15/25. Further review revealed an ADL (Activities of Daily Living) care plan with the following interventions for bed mobility: requires total assistance by two staff to turn and reposition in bed, initiated 12/13/25; and for dressing: total assistance of two staff to dress, initiated 12/13/25.Review on 1/14/26 or Resident #26's task notes for the last 30 days (12/16/25 to 1/14/26) revealed the following:Bed Mobility: Support Provided (how resident moves to and from lying position, turns side to side, and positions body while in bed). Resident #26 received 1 person assistance for 28 out of 30 days.Bathing: Support Provided (how resident takes full body bath/shower, sponge bath). Resident #26 received 1 person assistance for 6 out of 30 days.Personal Hygiene: Support Provided (how resident maintains personal hygiene). Resident #26 received 1 person assistance for 23 out of 30 days.Interview on 1/14/26 at approximately 2:30 p.m. with Staff F (Licensed Nursing Assistant) revealed that Staff F provided afternoon care on 1/14/26 to Resident #26 which included changing his/her brief and repositioning his/her in bed. Interview further revealed that Staff F completed the care alone.Interview on 1/14/26 at approximately 3:00 p.m. with Staff E (Director of Nursing) confirmed that Resident #26 is a 2-person assist with all care needs.Review on 1/14/26 of the facility's policy Activities of Daily Living (ADL), Supporting, revised April 2025, revealed: .5. Appropriate care and services are provided for residents who are unable to carry out ADLs independently, with the consent of the resident, and in accordance with the plan of care, including appropriate support and assistance with: a. hygiene (bathing, dressing, grooming, and oral care); b. mobility (transfer and ambulation, including walking); c. elimination (toileting);.Review on 1/14/26 of the facility's policy Care Plans, Comprehensive Person-Centered, revised March 2022, revealed: .The comprehensive, person-centered care plan: a. includes measurable objectives and timeframes. b. describes the services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being .

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	305039	A. Building B. Wing	01/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pleasant Valley Nursing and Rehab Center	8 Peabody Road Derry, NH 03038

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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 0658 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure services provided by the nursing facility meet professional standards of quality. Based on observation, interview, and record review, it was determined that the facility failed to ensure that expired medications were not administered for 1 medication in a total of 30 medication administrations observed. (Resident identifier is #89.)Findings include:Observation on 1/14/26 at approximately 7:20 a.m. of Staff A (Licensed Practical Nurse) administering Pataday 0.2% (percent) eye drops to Resident #89 revealed the eye drops were labeled with a open date of 10/29/25. Interview on 1/14/26 at approximately 7:20 a.m. with Staff A confirmed the above findings. Review on 1/14/26 of the manufacturer's instructions for Pataday Ophthalmic Solution 0.2%, Dated July 2020 revealed: . 6.3 Special Precautions for Storage . Discard 4 weeks after opening.Review on 1/14/26 of the facility policy titled, Administering Medications, Revision Date June 2024 revealed: . 13. The expiration/beyond use date on the medication label is checked prior to administering.Review on 1/14/26 of Drug Expiration Dates- Are Expired Drugs Still Safe to Take?, Drugs.com, Revision Date 8/1/24 revealed: . The expiration date is the final date that the manufacturer guarantees the full potency and safety of a medication. Eye drops should always be disposed of after their expiration date.

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	305039	A. Building B. Wing	01/14/2026

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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	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. Based on observation, interview, and record review, it was determined that the facility failed to ensure medications were appropriately labeled on 3 of 3 medication carts observed and 1 of 2 medication rooms observed. (Resident identifiers are #24, #50, #7, #35, #42, and #54.)Findings include:East 2 Medication Cart Observation on 1/13/26 at approximately 8:20 a.m. of the East 2 Medication Cart revealed the following medications, with no open/expiration dates: Resident #24's Latanoprost eye drops opened and not labeled with an open/open expiration date; Resident #50's Novolog 70/30 insulin pen opened and not labeled with an open/open expiration date; and Resident #7's Lantus insulin pen opened and not labeled with an open/open expiration date. Interview on 1/13/26 at approximately 8:20 a.m. with Staff B (Registered Nurse (RN)) confirmed the above findings. Further interview revealed that Resident #50 and Resident #7 both received the above insulin on 1/13/26. Review on 1/13/26 of Resident #50's January 2026's Medication Administration Record (MAR) confirmed that Lantus insulin was administered on 1/13/26 at 8:00 a.m. Review on 1/13/26 of Resident #7's January 2026's MAR confirmed that Novolog 70/30 insulin was administered on 1/13/26. [NAME] 1 Medication Cart Observation on 1/13/26 at approximately 8:25 a.m. of the [NAME] 1 Medication Cart revealed, with no open/expiration dates: Resident #35's Aspart insulin opened and not labeled with an open/open expiration date; and Resident #42's Lantus insulin pen opened and not labeled with an open/open expiration date. Interview on 1/13/26 at approximately 8:25 a.m. with Staff C (Licensed Practical Nurse (LPN)) confirmed the above findings. Medical/Surgical Unit (MSU) South Medication Cart Observation on 1/13/26 at approximately 8:30 a.m. of the MSU South Medication Cart revealed, with no open/expiration dates: Resident #54's Latanoprost eye drops opened and not labeled with an open/open expiration date. Interview on 1/13/26 at approximately 8:25 a.m. with Staff D (RN) confirmed the above findings. MSU Medication Room Observation on 1/13/26 at approximately 8:35 a.m. of the MSU Medication Room refrigerator revealed: A vial of Aplisol opened and not labeled with an open/open expiration date. Interview on 1/13/26 at approximately 8:35 a.m. with Staff D confirmed the above findings. Review on 1/13/26 of the manufacturer's instructions for Insulin Aspart Injection, Revision Date 2/2023 revealed: . Storage . After vials have been opened: . Throw away all opened Insulin Aspart vials after 28 days, even if they still have insulin left in them. Review on 1/13/26 of the manufacturer's instructions for Lantus (Glargine) Insulin, Revision Date 6/2023 revealed: . Storage . Lantus vial you are using should be thrown away after 28 days or if the expiration date has passed, even if it still has insulin left in it. Review on 1/13/26 of the manufacturer's instructions for Xalatan (Latanoprost Opthalmic Solution), Revision Date August 2011 revealed: . Once a bottle is opened for use, . for 6 weeks. Review on 1/13/26 of the manufacturer's instructions for Aplisol, Dated November 2013 revealed: . Storage . Vials in use more than 30 days should be discarded due to possible oxidation and degradation which may affect potency. Review on 1/13/26 of the manufacturer's instructions for Novolog Mix 70/30 Insulin, Revision Date 12/2018 revealed: . The Novolog Mix 70/30 FLexPen you are using should be thrown away after 14 days, even if it still has insulin left in it. Review of the facility policy titled, Medication Labeling and Storage, Revision Date February 2023 revealed: . 5. Multi-dose vials that have been opened or accessed (e.g., needle puncture) are dated and discarded within 28 days unless the manufacturer specifies a shorter or longer date for the open vial.