STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	385259	A. Building B. Wing	06/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Holladay Park Plaza	1300 NE 16th Avenue Portland, OR 97232

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 0684 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate treatment and care according to orders, resident?s preferences and goals. Based on interview and record review, it was determined the facility failed to implement physician orders for 1 of 3 sampled residents (#1) reviewed for medications. This placed residents at risk of unmet care needs. Findings include:Resident 1 admitted to the facility in 3/2026 with diagnoses including Parkinson's disease, cognitive communication deficit and dementia.Resident 1's 3/18/26 admission Orders included a medication order for carbidopa-levodopa (a medication for the treatment of Parkinson's disease, commonly known as Sinemet) QID at 8:00 AM, 12:00 PM, 4:00 PM and 8:00 PM.Resident 1's 4/2026 MAR indicated from 4/11/26 to 4/14/26 the administration times for carbidopa-levodopa had been changed to 7:00 AM, 11:00 AM, 4:00 PM and 7:00 PM.There was no documented evidence found in Resident 1's clinical record that the change in medication administration times had been ordered by Resident 1's provider or discussed with Resident 1.An Order Audit Report for Resident 1's carbidopa-levodopa indicated the change in administration times were implemented on 4/10/26 and changed back to the original administration times on 4/14/26 by Staff 2 (DNS).On 6/30/26 at 10:29 AM, Staff 6 (CMA) stated Sinemet must be given at consistent times daily or breakthrough tremors could be experienced. Staff 6 stated the facility had previously adjusted administration times for certain residents to reduce medication pass times.On 6/30/26 at 11:54 AM and 12:30 PM, Staff 8 (RN) and Staff 10 (LPN) stated a physician order was required to change administration times for a medication that originally included specific administration times. Staff 8 and Staff 10 each stated they were unable to find an order for Resident 1's change in Sinemet administration times.On 6/30/26 at 12:45 PM Staff 11, (LPN/Unit Manager) stated Resident 1's Sinemet administration times were adjusted by Staff 2 to simplify the CMA's workflow. Staff 11 further stated this should have been discussed with Resident 1, and a physician order should have been obtained prior to the change but could not find evidence of either. Staff 11 stated Resident 1's family was upset with the change, which was why the administration times were changed back on 4/14/26. On 6/30/26 at 1:09 PM, Staff 2 stated if a physician order for medication included specific administration times, then a new physician order was required to change administration times. Staff 2 stated she did not get a physician order to change Resident 1's Sinemet administration time and could not recall if she discussed the change with Resident 1.

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