

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455412	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/12/2025
NAME OF PROVIDER OR SUPPLIER Brookhaven Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1855 Cheyenne Carrollton, TX 75010	

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 0726</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.</p> <p>37028</p> <p>Based on interviews and record review, the facility failed to ensure sufficient nursing staff with appropriate competencies and skills set to provide nursing and related services for one (Hospitality Aide A) of three employees reviewed for staff qualifications.</p> <p>1. The facility failed to ensure Hospitality Aide A had a current nurse aide certification while employed at the facility while actively providing care for residents on 02/12/25: 6:00 AM - 2:00 PM shift, 02/10/25: 6:00 AM - 2:00 PM shift, 02/08/25: 6:00 AM - 2:00 PM shift, 02/07/25: 6:00 AM - 2:00 PM shift.</p> <p>This failure could result in residents being provided care by staff who do not have the training and competency needed for providing care.</p> <p>Findings include:</p> <p>Record review of Hospitality Aide A's personnel file revealed her date of hire was not listed. She did not have a CNA license.</p> <p>Record review of the facility's schedule revealed Hospitality Aide A was listed as a CNA and counted as a CNA in the numbers for the schedule on dates:</p> <p>02/12/25: 6:00 AM - 2:00 PM shift</p> <p>02/10/25: 6:00 AM - 2:00 PM shift</p> <p>02/08/25: 6:00 AM - 2:00 PM shift</p> <p>02/07/25: 6:00 AM - 2:00 PM shift</p> <p>An interview on 02/12/25 at 2:00 PM with Hospitality Aide A revealed she was working on Hall 300. She said her job duties included making beds and taking out the trash. She said she helped CNAs provide care to residents. She also said that when the facility was short of staff, she would feed residents, perform incontinence care, and work as the second staff for two person transfers. Hospitality Aide A said she had finished school to be a CNA but had not taken her CNA test.</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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0726</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>An interview on 02/12/25 at 2:35 PM with ADON revealed she assisted with staffing. She said Hospitality Aide A did not have a CNA license. The ADON said Hospitality Aide A was not supposed to work by herself. The ADON said Hospitality Aide A was not supposed to be counted in the schedule numbers and was supposed to work as an extra staff as a Hospitality Aide. The ADON said 7 CNAs were required for the 6:00 AM - 2:00 PM shift and 6 CNAs were required for the 2:00 PM - 10:00 PM shift. The ADON said when she made the schedule she included Hospitality Aide A in the numbers, but she was supposed to work with another CNA.</p> <p>An interview with the DON on 02/12/25 at 3:45 PM revealed he was aware that Hospitality Aide A did not have a CNA license. The DON said Hospitality Aide A was not allowed to provide care independently. The DON said there was no risk to the resident for Hospitality Aide A to work, because he would never allow her to work independently. The DON said he did not know Hospitality Aide A was counted as a CNA in the schedule numbers even though he reviewed the schedule every day. He said he never saw Hospitality Aide A work without another CNA.</p> <p>The Administrator was asked to provide a facility policy for competent nursing staff on 02/12/25 at 4:23 PM. The Administrator failed to provide the policy prior to exit on 02/12/25.</p>