

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455515	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/09/2025
NAME OF PROVIDER OR SUPPLIER Copperas Cove Ltc Partners, Inc.		STREET ADDRESS, CITY, STATE, ZIP CODE 607 W Ave B Copperas Cove, TX 76522	

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 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. (continued on next page)

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to ensure the resident's right to be free from abuse, neglect, misappropriation of resident property and exploitation for three of five residents (Resident #1, Resident #2, and Resident #3) reviewed for drug diversion. 1. The facility failed to ensure LVN A did not take 100 (one hundred) Torsemide 100 mg tablets prescribed for Resident #1.2. The facility failed to ensure LVN A did not take 100 (one hundred) Torsemide 100 mg tablets prescribed for Resident #2.3. The facility failed to ensure LVN A did not take 30 (thirty) Torsemide 100 mg tablets prescribed for Resident #3. These failures could place residents at risk of misappropriation, medication errors and compromised health conditions. Findings include: Record review of the facility's self-report intake, dated 5/5/2025, revealed the following: Narrative of The IncidentSame nurse entered orders for three different residents for the same medication, Torsemide. The medications were then discontinued after the pharmacy delivered the medications. Medications were signed in by same nurse and facility unable to locate three of the four medication cards that were delivered. The Medical Director and NP deny giving nurse orders for Torsemide on any of the identified residents.1. Record review of Resident #1's face sheet, dated 7/9/2025, revealed a [AGE] year-old female who was re-admitted to the facility on [DATE]. Her diagnoses included: Hypothyroidism (thyroid produces too much thyroid hormone), Hypertension (high blood pressure), Age-related decline (natural changed in thinking speed, memory and cognitive abilities that occur when people age, Cerebral Infarction. Record review of Resident #1's Quarterly MDS assessment, dated 6/26/2025, revealed she had a BIMS score of 3, which indicated severely impaired cognition. Record review of Resident #1's Care Plan, initiated 4/10/2025, revealed focus areas which included: I have a Vitamin/Mineral deficiency. Intervention listed as Administer medication as ordered by M.D Record review of Resident #1's Order Summary, dated 3/8/2025 at 12:40 AM, revealed an unauthorized order entered in PCC by LVN-A for Torsemide Oral Tablet 100mg. Give (1) tablet by mouth two times a day for fluid overload. A verbal order was entered in PCC by LVN-A on 3/8/2025 at 9:24 PM to discontinue the Torsemide 100mg. Record review of the Delivery Manifest Report Details, Manifest ID: M412308X0000638512, dated 3/8/2025, revealed LVN-A received sixty (60) Torsemide 100mg tablets order for Resident #1. 2. Record review of Resident #2's face sheet, dated 7/9/2025, revealed a [AGE] year-old female resident who was admitted to the facility on [DATE]. Her diagnoses included: Senile Degeneration of the Brain (cognitive decline), Major Depressive Disorder (persistent sadness and loss of interest in activities) and Hyperlipidemia (high cholesterol). Record review of Resident #2's Quarterly MDS assessment, dated 5/16/2025, revealed she had a BIMS score of 7, which indicated severely impaired cognition. Record review of Resident #2's Care Plan, initiated 5/4/2025, revealed focus areas which included: I have a Vitamin/Mineral deficiency. Intervention listed as Administer medication as ordered by M. D. Record review of Resident #2's Order Summary, dated 4/23/2025 at 9:16 PM, revealed an unauthorized verbal order was entered in PCC by LVN-A for Torsemide Oral Tablet 100mg. Give (1) tablet by mouth two times a day for edema. A verbal order was entered in PCC by LVN-A on 4/23/2025 at 9:16 PM to discontinue the Torsemide 100mg. Record review of Delivery Manifest Report Details, Manifest ID: M412308X0000640574, dated 4/26/2025, revealed LVN-A received ten (10) Torsemide 100mg tablets order for Resident #2. Record review of Resident #2's Physician's Order, dated 4/29/2025 at 3:22 AM, revealed an unauthorized verbal order was entered in PCC by LVN-A for Torsemide Oral Tablet 100mg. Give (1) tablet by mouth two times a day for edema. A verbal order was entered in PCC by LVN-A on 4/29/2025 at 3:22 AM to discontinue the Torsemide 100mg. Record review of Resident #2's Physician's Order, dated 4/29/2025 at 5:03 PM, revealed an unauthorized phone order was entered in PCC by LVN-A to discontinue the Torsemide 100mg. Record review of Delivery Manifest Report Details, Manifest ID: M412308X0000640770, dated 5/1/2025, revealed LVN-A received thirty (30) Torsemide 100mg tablets order for Resident #2. 3. Record review of Resident #3's face sheet, dated 7/9/2025, revealed a [AGE] year-old female who was admitted to the facility on [DATE]. Her diagnoses included: Type 2 Diabetes (body does not produce enough insulin), Hypertension (high blood pressure and Hyperlipidemia (high cholesterol). Record review of Resident #3's Quarterly MDS assessment, dated 5/16/2025, revealed she had a BIMS score of 7, which indicated severely impaired cognition. Record review of Resident #3's Order Summary, dated 5/2/2025 at 9:55 PM, revealed an unauthorized verbal order was entered in PCC by LVN-A for Torsemide Oral Tablet 100mg. Give (1) tablet by mouth two times a day for edema. A verbal order was entered in PCC by LVN-A on 5/3/2025 at 10:46 PM</p>		