

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  455606	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/21/2025
NAME OF PROVIDER OR SUPPLIER  Park View Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  3301 View St Fort Worth, TX 76103	

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 0921  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.  (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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Based on observation, interview, and record review, the facility failed to maintain a safe, functional, sanitary, and comfortable environment for 1 of 3 shower rooms (located on Central Station) reviewed for physical environment. The facility failed to ensure a shower room on the Central Station had two working shower curtains, a working shower head, and a clean toilet. The failure placed residents at risk for illness and decreased quality of life. Findings included: Observation on 10/07/25 at 11:40 AM of the shower room revealed the toilet was blocked by equipment inside the shower room. The toilet had a dark substance with an odor. The shower on the right side had a curtain that was torn resulting in limited privacy for showering. The shower on the left side did not have a shower curtain resulting in residents not having privacy for showering and the shower head hose had holes which resulted in the water leaking out the side of the hose. Interview on 10/07/25 at 11:47 AM with CNA E revealed she had worked on Central Station for some time providing showers in this shower room; she noticed the showers without proper shower curtains and broken shower head. CNA E stated she had not reported the damage, however she stated these damages should be reported to the nurse and to the maintenance department by logging it in the maintenance book for repairs. According to CNA E residents did not use the toilet in the shower room. She was unaware how long the toilet had been dirty and was not sure how long the equipment had been in the doorway. She further stated housekeeping cleaned the restroom once in the morning and again after lunch. CNA E stated she recently completed an In-service on resident privacy, protecting residents' privacy, and their rights. Interview on 10/07/25 at 2:19 PM with the Maintenance Director revealed he ordered curtains recently and replaced all the shower curtains in the shower rooms. The Maintenance Director stated he was unsure about how or why the curtains were disappearing. The Maintenance Director stated the nursing staff were responsible for logging maintenance concerns in the maintenance log book which was checked daily. The Maintenance Director stated not having shower curtains in the shower rooms placed residents at risk of their privacy. The Maintenance Director stated housekeeping also maintained the cleanliness of the shower room and should clean it throughout the day, this was monitored by nursing staff to report to the Housekeeping of any uncleaned situations. Interview on 10/07/25 at 3:27 PM with the DON revealed maintenance completed an audit to replace shower curtains not long ago. The DON was not aware of any damaged or missing shower curtains. The DON stated nursing staff were responsible for notifying maintenance by updating the maintenance log book. The DON stated not having functioning showers placed residents at risk of their privacy and ability to use a functioning shower. Interview on 10/07/25 at 4:07 PM with the Administrator revealed he was aware of the Maintenance Director purchasing shower curtains for all showers, he was not aware of any damaged shower curtains or shower heads. The Administrator stated it was the responsibility of the nursing staff to report any damage or irregularities in the shower rooms; it was the responsibility of the maintenance and housekeeping staff to maintain the equipment and cleanliness. The Administrator stated not ensuring the shower rooms were safe and clean placed residents at risk of privacy, safety, and infections. Record review of the facility's Homelike Environment policy, dated 04/24/25, reflected: A homelike environment is essential for promoting the comfort, dignity, and quality of life of residents. Respect for Individual Preferences: Recognize and honor the personal preferences and choices of each resident, including their daily routines, activities, and living arrangements. Privacy and Dignity: Ensure at residents have privacy and that their dignity is maintained at all times. This includes respecting their personal space and providing private areas for personal care and family visits.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>(continued on next page)</p>

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Based on observation, interview, and record review, the facility failed to maintain an effective pest control program to ensure the facility was free of pests for 3 of 3 hall locations (North Station, Central Station, South Station), nurse's stations, Central Station dining room and 1 of 1 biohazard closet reviewed for physical environment. The facility failed to ensure North Station, Central Station, South Station, and nurses' stations, Central Station dining room, and the biohazard closet were free from gnats. This failure could place residents at risk for the potential spread of infection, cross-contamination, and decreased quality of life. Findings included: Observation on 10/07/25 at 11:50 AM of Central Station shower room revealed gnats circling the shower room. Observation on 10/07/25 at 12:00 PM at the Central Station nursing station revealed gnats and flies flying. Interview on 10/07/25 at 12:03 PM, with Resident #2 revealed Flies and gnats are bad here. I try to keep my door closed to keep them out of my room. According to Resident #2, residents were seen swatting flies during meal times, Resident #2 stated he too spent a lot of time during the day swatting flies, which could be frustrating. Resident #2 stated he tried to always eat in his room. Observation on 10/07/25 at 12:25 PM of dining room near the Central Station revealed at least 5 gnats flying around resident tables. Observation and interview on 10/07/25 at 12:33 PM with Resident #3 revealed him with a fly swatter in his room on the South Station. When asked about gnats or flies, Resident #3 stated, There are some flies, but there seems to be a lot of gnats. I am not too bothered by them because I have a fly swatter that I use all the time. Interview and observation on 10/07/25 at 12:46 PM with CNA A revealed she observed flies and gnats all over the facility. CNA A stated today she was working on South Station CNA A stated she was ready for the roaches and flies to go! CNA A stated, I noticed several residents with fly swatters in their rooms, residents will say they are sick of the pest, the flies and gnats. CNA A stated she has reported the pest situation to the nurses, so they could log it in the Maintenance log. CNA A stated she also has reported to the Maintenance Department verbally and by logging in the maintenance log book. CNA A stated she had family members that resided in the facility, when she visited, she observed family not being able to eat without gnats and flies swarming their food, especially during meal times. CNA A stated having flies and gnats were a big problem, it made the place disgusting and unlivable. Interview on 10/07/25 at 1:40 PM with CNA B revealed she worked on the South Station and had received complaints from residents about the flies and gnats, CNA B stated, they are everywhere. CNA B stated residents have told her It's disgusting in here. CNA B stated I do not eat in the facility because it was too complicated, it's nasty. According to CNA B she was responsible for reporting to the nurse, and to the maintenance department by updating the log book. CNA B stated she had seen Pest Control come in and spray, however she did not see the vendor in the building consistently. According to CNA B, not having adequate pest control could lead to infestations and residents feeling uncomfortable in their homes. Observation and interview on 10/07/25 at 2:01 PM of the biohazard closet with CNA B located on Central Station revealed she needed to ask ADON C for the code to open the closet. Once ADON C opened the Biohazard Closet a combination of gnats and flies began flying in and out of the closet, it was revealed on the right side of the closet to have 3 closed boxes, 1 box with red bag not properly concealed. To the left of the closet an opened box with red bag that was currently being used for discarded material. There was a white plastic bag on the floor in front of the opened box. Dead flies were noted to be on the floor throughout the closet. On the top shelf revealed a sharp container with plastic bags. On the lower shelf there was a full sharp container, 20-30 dead flies, several scattered unrolled red biohazard bags. According to ADON C the nursing staff was responsible for discarding biohazards in the closet and keeping it clean. ADON C acknowledged the plastic bag on the floor, the dead flies, and the closet shelves in disarray. ADON C stated the closet was cleaner than it had been in the last couple of weeks. ADON C stated housekeeping recently cleaned the closet, disposing several flies and gnats. Interview on 10/07/25 at 2:19 PM with The Maintenance Director revealed there has been a big concern with gnats and flies in the facility recently. The Maintenance Director stated there was an area outside with standing water on the north side of the building, the smoke patio door open and closing and a room on the North Station that needed to be treated. The Maintenance Director stated Pest Control had been treating the facility weekly and was present this morning (10/07/25) with no recommendations. The Maintenance Director stated he was aware of the Biohazard closet being infested with gnats when it was discovered the biohazard vendor had not taken the boxes after two weeks. The Maintenance Director stated something just told him to go check the biohazard closet and that was when he discovered the gnats. According to the Maintenance Director the</p>		