STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455606	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Park View Care Center	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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. Based on observation, interview, and record review , the facility failed to ensure residents had the right to a safe, clean, comfortable and homelike environment to include housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior for 2 of 8 residents (Resident #2 and Resident #3) reviewed for environmental conditions.The facility failed to ensure the privacy curtains for Resident #2 and Resident #3 were maintained in a clean and sanitary manner free of dried vomit. This failure could place residents at risk of living in an unsanitary, unsafe environment and a diminished quality of life. Findings included:During an observation and interview on 05/27/26 at 11:12 AM, the privacy curtain in Resident #2's and Resident #3's room had several areas with a dried black substance. Resident #3 stated it was from when his roommate, Resident #2, vomited and had been like that for the past couple of days. He stated he told the nurse and maintenance. He stated he had to get housekeeping to come change the curtain. During an interview on 05/27/26 at 1:38 PM, [NAME] C stated he just finished cleaning Resident #2's and #3's room. He stated the privacy curtain had been changed before he cleaned the room. He stated if he saw stains he would tell his supervisor that it needed to be changed. He stated housekeeping was supposed to check the curtains daily. He said it was important to make sure they were clean for the health of residents. During an interview on 05/27/26 at 1:43 PM, RN D stated the black substance on the privacy curtain was vomit. She stated it happened yesterday, and she used bleach wipes to try to clean it up. She said she assumed a CNA told housekeeping the curtain got soiled and needed to be changed. She said she could not remember who the aides were. She stated she did not tell housekeeping that the curtain was soiled. She said the risk to the residents would be germs. During an interview on 05/27/26 at 1:59 PM, CNA E stated she noticed the black stains on the curtain and said it had happened yesterday. She stated the Maintenance Director was fixing sprinklers and probably had not gotten around to changing it, and she stated she did not remember if she reported to anyone that the curtain needed to be changed. She stated she remembered using bleach wipes to clean up the stains. She stated the risk to the resident would be germs and cross contamination. During an interview on 05/27/26 at 2:48 PM, the DON stated Resident #2's and Resident #3's privacy curtain should have been changed and she expected staff to notify housekeeping right away. She said the risk to the resident would be infection control and would not be homelike. During an interview on 05/27/26 at 3:13 PM, the Maintenance Director stated housekeeping was responsible for changing the privacy curtains and the only thing Maintenance did was adjust the tracks. During an interview on 05/27/26 at 3:20 PM, the Environmental Services Director stated his department and Maintenance was responsible for changing the privacy curtains when they were stained. He stated he kept some available in the linen closet if something happened when housekeeping was not there. He said Resident #2's and Resident #3's privacy curtain was changed earlier today (05/27/26) around 1:00 PM when one of the residents mentioned it to him and said his roommate threw up. He stated he was not notified by any staff the privacy curtain needed to be changed. He stated no resident should have to experience having soiled or bodily fluids on the curtain and it was unhealthy. During an interview on 05/27/26 at 3:55 PM, the Administrator stated housekeeping was responsible for changing privacy (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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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	curtains and they were to be changed when soiled. She stated Resident #2's and #3's privacy curtain should have been changed and should have been reported by nursing staff to housekeeping to change it. She said the risk to the residents was that it was an infection control issue and not a clean and homelike environment.Record review of the facility's Resident Rights policy, dated 02/20/21, reflected that: .8. Safe environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.

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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 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 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 and rodents for 2 of 3 nurses' station (North Station and Central Station) and 2 of 3 dining rooms (North Dining Room and Central Dining Room), for 2 of 8 residents (Resident #1 and Resident #4) reviewed for pest control. 1. The facility failed to ensure the North Station nurses' desk and North Dining Room were free from flies. 2. The facility failed to ensure the Central Station nurses' desk and Central Hall dining room were free from flies. This failure could place residents at risk for the potential spread of infection, cross-contamination, and decreased quality of life.Findings included:1. During an observation of North Station on 05/27/26 at 9:22 AM, Resident #1 had flies circling in his room and landing on his personal items. Resident #1 was not able to be interviewed due to cognitive impairment.During an observation of North Station nurses' desk on 05/27/26 at 11:40 AM, there were flies circling and landing on the desk and then flying to the hall.Record review of the facility's pest control binder revealed the following: 03/03/26 - Location (Interior, Resident Room) - Issues Flies room [ROOM NUMBER],15c 04/14/26 - Location (Interior, Resident Room) 25, 23, 22, 21, 20, 19, 18, 17, 16, 15, 14, 12, 11, 10, 13,9, 64, 63, 62, 52, 51, 41, 40, 39, 38, 35, 34, 33, 32, 30, 81, 80, 77, and 72 During an interview on 05/27/26 at 11:12 AM, Housekeeper A stated he was assigned to the North station. He stated no residents complain about flies. He stated when he saw pests, he reported to his director and to the Maintenance Director. He stated Maintenance was responsible for following up on the complaints. He stated pest control was at the facility every week.During an interview on 05/27/26 at 1:13 PM, Nurse Aide B revealed he worked at the facility for seven months. He stated there was a constant issue with flies because the doors were opened frequently for residents to go out to smoke, which led to the flies entering residents' rooms and circling around. He stated he had not had residents complain about flies. He stated he would report the concerns to Maintenance, and he would write the report in the book, pest control log. He stated pest control visited weekly.During an interview on 05/27/26 at 03:31 PM, the Maintenance Supervisor revealed he noticed flies in various areas in the facility. He stated the flies were coming in due to the rain and the doors being opened frequently for residents going to and from the smoking patio. He stated pest control had been at the facility for their weekly visits , and they treated for pests and flies. He stated pest control applied traps and treated outdoor and indoor areas. The Maintenance Supervisor stated other than being a pest control issue they were irritating, and the risk would be contamination. During an interview on 05/27/23 at 3:58 PM, the Administrator revealed she was not aware of flies in the building. The Administrator stated all staff were aware that if they saw pests or flies, they were supposed to document it in the pest control log. She stated the maintenance department was responsible for notifying the pest control company. She said the pest control company was at the facility every week. The Administrator stated the flies were irritating.2. During an observation and interview on 05/27/26 at 10:49 AM, a fly was flying around the room and landed on Resident #4 while he was in his bed on the Central Hall. He stated the flies bothered him and had gotten worse, but there was nothing he could do about it. Resident #4 said he assumed they came in through the door that went to the smoking area. He stated they were everywhere. He stated he would shoo at them when they landed on him or near him. During an observation on 05/27/26 between 12:46 PM and 12:52 PM, three flies were flying around the Central Hall dining room during the lunch meal service. During an interview on 05/27/26 at 12:39 PM, MA F stated she saw a few flies at the nurses' station but not in resident rooms. She said the flies were bad in the summertime and came in when they opened the doors for residents who smoked. She stated if she saw any pests she was supposed to write it in the log book for Maintenance, so pest control could come out. She stated flies could bite residents, and the residents could find them annoying. During an interview on 05/27/26 at 1:43 PM, RN D stated flies were seen all over and about three flew in every time they opened the door. She said (continued on next page)

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F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	she wrote it down in the Maintenance log, and they contacted pest control. She stated the risk to residents was that the flies were disgusting and could carry germs.Record review of the facility's Pest Control policy, dated May 2020, reflected: It is the policy of this facility to maintain an effective pest control program that eradicates and contains common household pests and rodents.1. Facility will maintain a written agreement with a qualified outside pest service to provide comprehensive pest control services on a regular and scheduled basis. 4. Facility will utilize a variety of methods in controlling certain seasonal pests, that is flies. These will involve indoor and outdoor methods that are deemed appropriate by the outside pest service and state and federal regulations