

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  455727	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/05/2024
NAME OF PROVIDER OR SUPPLIER  Park Village Healthcare and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 207 E Parkerville Rd Desoto, TX 75115	

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 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>44786</p> <p>Based on observation, interview, and record review the facility failed to store all drugs and biologicals in locked compartments and permit only authorized personnel to have access for one (Treatment Cart #1) of two treatment carts reviewed.</p> <p>The facility failed to ensure Treatment Cart #1 was locked when unattended.</p> <p>This failure could place residents at risk of having access to unauthorized medications and/or lead to possible harm or drug diversion.</p> <p>Findings included:</p> <p>In an observation on 08/03/24 at 10:10 AM, Treatment Cart #1 was observed unlocked and unattended in the 100 Hall area. There were 4 residents in the immediate area, and no staff with visibility to the cart.</p> <p>The following items were observed in the cart:</p> <p>Hydrogen Peroxide</p> <p>Saline</p> <p>Alcohol Wipes</p> <p>Ketoconazole Shampoo</p> <p>Nystatin Topical Powder</p> <p>Zinc Oxide Ointment</p> <p>Hydrocortisone Cream</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 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on 08/03/24 at 10:15 AM, Nurse A stated she was the one responsible for Treatment Cart #1. She stated she had not used the cart since she started the shift this morning. She stated it must have been left unlocked by the nurse from the previous shift, the overnight shift. Nurse A stated she could not remember the name of that nurse.</p> <p>In a follow-up interview on 08/03/24 at 12:20 PM, Nurse A stated the risk of leaving any treatment cart unlocked and unattended was a resident getting a hold of something from the treatment cart.</p> <p>In an interview on 08/05/24 at 3:50 PM, ADON B stated the risk of an unlocked and unattended treatment cart was a resident could get exposed to the wrong medication or drink something that is not drinkable.</p> <p>In an interview on 08/05/24 at 4:17 PM, DON C stated the risk of an unlocked and unattended treatment cart was a resident could get anything off the cart. She stated all nurses were responsible for ensuring the treatment carts were locked at all times.</p> <p>In an interview on 08/05/24 at 5:35 PM, Administrator D stated he was informed about the unlocked treatment cart. He stated the treatment carts should be locked at all times. He stated the risk of an unlocked and unattended treatment cart was residents could get something off the cart and it be detrimental to their health.</p> <p>Record review of the facility's policy titled, Policy/ Procedure-Nursing Services with a revision date of 07/2023, reflected the following:</p> <p>Section: Care and Treatment/ Pharmacy</p> <p>Subject: Medication Access and Storage/ Drug Destruction</p> <p>Policy:</p> <p>It is the policy of this facility to store all drugs and biological in locked compartments under proper temperature controls. The medication supply is accessible only to licensed nursing personnel, or staff members lawfully authorized to administer medications.</p> <p>Only licensed nurses, the consultant pharmacist, and those lawfully authorized to administer medications (medication aides) are allowed to access medications. Medication rooms, carts, and medication supplies are locked or attended by persons with authorized access.</p>		