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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455742 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 03/19/2026 |
| NAME OF PROVIDER OR SUPPLIER The Lev at San Antonio | | STREET ADDRESS, CITY, STATE, ZIP CODE 7703 Briaridge Drive San Antonio, TX 78230 | |
| 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 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few | <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>Based on observation, interview and record review, the facility failed to ensure all drugs and biologicals for 1 of 4 medication carts (MA Cart 500 Hall) reviewed for storage of drugs. The facility failed to ensure the cart for 500 Hall was locked and secured. This deficient practice could place residents at risk of medication misuse and diversion. The findings were: Observation on 3/16/2026 at 1:54 pm of the MA Med Cart for 500 Hall revealed it was unlocked. During an interview with MA A on 3/16/2026 at 1:56 p.m., MA A confirmed med cart for 500 hall was unlocked. She stated it was unlocked because she was putting stuff away and was getting ready for shift change to another hall. She stated the cart should not be unlocked because it would be unsafe for residents to have access to the medications. During an interview with ADON on 3/19/2026 at 10:04 am - she stated the medication cart should have been locked to prevent someone from having unauthorized access and for resident safety. Record review of the facility policy titled Medication Storage, revealed, All drugs and biologicals will be stored in locked compartments. Only authorized personnel will have access to the keys to locked compartments.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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