

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455763	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/05/2025
NAME OF PROVIDER OR SUPPLIER Park Bend Rehabilitation and Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 301 Huguley Blvd Burleson, TX 76028	

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 - Some	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. (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 0761</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, observation and record review, the facility failed to store all drugs and biologicals in locked compartments under proper temperature controls and permit only authorized personnel to have access to the keys for 3(Resident#1, Resident#2 and Resident#3) of 10 residents reviewed. The facility failed to ensure Resident#1, Resident#2 and Resident#3 did not have drugs and biologicals at their bedside. This failure could place residents at risk of consuming or using wrong medications and biologicals that could lead to harm. Findings included: Record review of Resident #1's face sheet, dated 09/23/25, reflected the resident was an [AGE] year-old female who admitted to the facility on [DATE] with diagnoses that included: adult failure to thrive (decline in overall health and functional abilities), dizziness and giddiness (sensations of imbalance or lightheadedness, often caused by various underlying conditions, and it's important to distinguish between them), parkinsonism (conditions that affect movement), unspecified, chronic pain syndrome (persists or recurs for longer than 3 months) and Dementia (Describe a group of symptoms affecting memory, thinking and social abilities) in other diseased classified elsewhere, unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety. Record review of Resident #1's entry MDS Assessment, dated 09/17/25, reflected Resident #1 had no BIMS documented. Record review of Resident #2's face sheet, dated 09/23/25, reflected the resident was an [AGE] year-old female who admitted to the facility on [DATE] with diagnoses that included: malignant neoplasm of anal canal (anal cancer which arises from the anus, the distal opening of the gastrointestinal tract), squamous cell carcinoma of anal skin(type of anal cancer), hemorrhage of anus and rectum(rectal bleeding can be caused by various conditions), other low back pain and unspecified Dementia (persists or recurs for longer than 3 months) and Dementia (Describe a group of symptoms affecting memory, thinking and social abilities), unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety. Record review of Resident #2's entry MDS Assessment, dated 09/16/25, reflected Resident #2 had no BIMS documented. Record review of Resident #3's face sheet, dated 09/23/25, reflected the resident was an [AGE] year-old female who originally admitted to the facility on [DATE] and readmitted on [DATE] with diagnoses that included: Parkinson's disease (conditions that affect movement)without dyskinesia (involuntary muscle movements), without mention fluctuations, unspecified Asthma, uncomplicated and unspecified Dementia (Describe a group of symptoms affecting memory, thinking and social abilities), unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety. Record review of Resident #3's quarterly MDS Assessment, dated 09/05/25, reflected Resident #3 had a BIMS of 07 which indicated severe impairment. During an observation and interview on 09/23/25 at 6:50 am Resident#1 stated she used the cream for her hand sometimes when it felt tight. Observation at Resident#1's bedside revealed: * Aspercreme- original with 10% Trolamine salicylate pain relief creme - 100g During an interview on 09/23/25 at 7:00 am LVN A stated residents were not allowed to have any medications at bedside for their safety. LVN A stated residents can bring in outside medication, but they had to stay at the nursing cart at the bottom, at the nursing station or in the medication room. During an interview and observation on 09/23/25 at 7:30 am Resident#2 did not know about the medications and creams at her bedside. Observation in the resident's room revealed: *Refresh tears- Lubricant eye drops- 15ml*Systane nighttime lubricant eye ointment - overnight relief - 3.5 g*Triamcinolone Acetonide Cream USP, 0.1% - 5g*Maximum Strength Cortizone 10 1% (Hydrocortisone anti itch ointment)- 56g* 3 Vagistat external vulvar creme (Miconazole Nitrate cream 2%) -9g each* 10 capsules of Gas X Extra strength (Simethicone 125mg/antigas extra strength*3 Periguard Ointment skin protectant with Vitamins A,D,E, Aloe Vera and Zinc - 100g each During an interview and observation on 09/23/25 at 9:55am Resident#3 stated she did not have medication in her room. Observation in the resident's room revealed:*Breathe right nasal strips- extra strength (opens your nose to instantly relieve nasal congestion)During an interview on 09/23/25 at 10:38 am, LVN B stated residents cannot have anything in their room that says keep out of the reach of children.During an interview on 09/23/25 at 11:32 am LVN C stated residents cannot have medications in their room at all. LVN C stated resident can misuse the medication, overdose that could lead to death.During an interview on 09/23/25 at 1:34pm the DON and surveyor went over the residents that had medications that were observed in their room. The DON stated medications were kept on the medication cart. The DON stated Residents cannot keep medications in their rooms. The DON stated nursing staff were responsible for keeping</p>		