

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555754	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  02/05/2026
NAME OF PROVIDER OR SUPPLIER  Village Square Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1586 W. San Marcos Blvd San Marcos, CA 92078	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview and record review, the facility failed to ensure residents' controlled medications (medications that can cause physical and mental dependence and are regulated by the Drug Enforcement Administration) were secured in the facility's medication carts. Specifically, controlled substances, including Individual Patient's Narcotic Records (IPNR), were removed from the cart without the licensed nurses' (LNs) knowledge and were left unaccounted for 10 of 10 residents (1, 2, 3, 4, 5, 6, 7, 8, 9, 10). This had the potential for affected residents' medication to not being available in the event they were needed. There were no missed doses for the affected residents. Findings: On 12/12/25, the Department received a facility report incident related to pharmaceutical services. On 1/7/26, an unannounced onsite visit to the facility was conducted. A review of the residents' record were as follows. 1. Resident 1 was admitted to the facility on [DATE], with diagnoses which included liver cancer, per the facility's admission Record. A review of Resident 1's physician order dated 11/11/25 indicated, Tramadol 50 mg tablet 1-2 tablets for moderate and severe pain as needed (PRN) every 6 hours. A review of the pharmacy packing slip dated 11/11/25 indicated, the facility licensed nurse (LN) received 30 tablets of Tramadol HCL 50 mg (milligrams). A review of Resident 1's Individual Patient's Narcotic Record (IPNR) indicated, there were 26 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 2. Resident 2 was admitted to the facility on [DATE], with diagnoses which included chronic back pain, per the facility's admission Record. A review of Resident 2's physicians order dated 8/22/25 indicated, Hydrocodone- Acetaminophen 10-325 mg tablet, give 1 tablet by mouth every 4 hours PRN (as needed) for moderate pain. In addition, the physicians order dated 9/15/25 indicated, Oxycontin 10 mg, give 1 tablet by mouth twice a day for pain management. a. A review of the pharmacy packing slip dated 11/5/25 indicated that the facility's licensed nurse (LN) received 60 tablets of Oxycodone - Acetaminophen (Percocet) 10-325 mg. A review of Resident 2's Individual Patient's Narcotic Record (IPNR) indicated there were 23 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). b. A review of the pharmacy packing slip dated 11/5/25 indicated that the facility's licensed nurse (LN) received 8 tablets of Oxycodone - Acetaminophen (Percocet) 10-325 mg. A review of Resident 2's Individual Patient's Narcotic Record (IPNR) indicated there were 5 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). c. A review of the pharmacy packing slip dated 11/28/25 indicated that the facility's licensed nurse (LN) received 28 Oxycontin ER 10 mg. tablets. A review of Resident 2's Individual Patient's Narcotic Record (IPNR) indicated there were 5 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 3. Resident 3 was admitted to the facility on [DATE], with diagnoses which included chronic low back pain - intractable, per the facility's admission Record. A review of Resident 3's physicians</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>order dated 10/26/25 indicated, Oxycodone 10 mg., give 1 tablet by mouth every 6 hours PRN (as needed) for pain.A review of the pharmacy packing slip dated 12/3/25 indicated that the facility's licensed nurse (LN) received 30 tablets of Oxycodone HCL(IR) 10 mg.A review of Resident 3's Individual Patient's Narcotic Record (IPNR) indicated there were 0 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 4. Resident 4 was admitted to the facility on [DATE], with diagnoses which included chronic venous hypertension with ulcer of left and right lower extremities (a severe, chronic, and often painful open skin lesion caused by sustained high pressure in the leg veins), per the facility's admission Record. A review of Resident 4's physicians order dated 10/1/25 indicated, Oxycodone 5 mg., give 1 tablet by mouth every 4 hours PRN (as needed) for moderate pain. There was no packing pharmacy packing slip included in the documentation.A review of Resident 4's Individual Patient's Narcotic Record (IPNR) indicated, there were 17 tablets dispensed by the pharmacy with 5 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 5. Resident 5 was admitted to the facility on [DATE], with diagnoses which included chronic vascular disorders of intestines- ischemic colitis (reduced blood flow to the large intestine (colon) causes inflammation and damage due to lack of oxygen and causes ongoing or recurring stomach pain, diarrhea, and potential tissue damage over time.), per the facility's admission Record. A review of Resident 5's physicians order dated 8/4/25 indicated, Oxycodone 15 mg., give 1 tablet by mouth every 4 hours PRN (as needed) for epigastric pain.A review of the undated pharmacy packing slip indicated, the facility received 58 tablets of Oxycodone HCL(IR) 15 mg. There was no licensed nurse (LN) signature to reflect the Oxycodone HCL(IR) was received. A review of Resident 5's Individual Patient's Narcotic Record (IPNR) indicated there were 2 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 6. Resident 6 was re- admitted to the facility on [DATE], with diagnoses which included chronic pain syndrome, per the facility's admission Record. A review of Resident 6's physicians order dated 11/27/25 indicated, Oxycodone 5 mg., give 1 tablet by mouth every 4 hours PRN (as needed) for mild pain. And 15 mg., 3 tablets by mouth every 4 hours PRN for severe pain.A review of the undated pharmacy packing slip indicated, the facility received 90 tablets of Oxycodone HCL(IR) 5 mg. There was no licensed nurse (LN) signature to reflect the Oxycodone HCL(IR) 5 mg. was received. A review of Resident 6's Individual Patient's Narcotic Record (IPNR) indicated there were 90 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 7. Resident 7 was readmitted to the facility on [DATE], with diagnoses which included end stage renal disease (kidney failure), per the facility's admission Record. A review of Resident 7's physicians order dated 9/24/25 indicated, Oxycodone 5 mg., give 1 tablet by mouth every 4 hours PRN (as needed) for pain management.A review of the undated pharmacy packing slip indicated, the pharmacy dispensed 30 tablets of Oxycodone HCL(IR) 5 mg. There was no licensed nurse (LN) signature to reflect the Oxycodone HCL(IR) 5 mg. was receivedA review of Resident 7's Individual Patient's Narcotic Record (IPNR) indicated there were 7 tablets left in the med bubble pack (packaging in which a product is sealed between a cardboard backing and clear plastic cover). 8. Resident 8 was readmitted to the facility on [DATE], with diagnoses which included cervical disc disorder (a wear and tear condition where the soft, rubbery cushions (discs) between your neck bones (vertebrae) break down, dry out, or bulge, often causing chronic neck pain, stiffness, and nerve pain that radiates into the shoulders or arms) , per the facility's admission Record. A review of Resident 8's physicians order dated 6/18/25 indicated, Oxycodone 20 mg., give 1 tablet by mouth every 4 hours PRN (as needed) for pain.A review of the undated pharmacy packing slip indicated,</p> <p>(continued on next page)</p>		

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