

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555857	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/31/2025
NAME OF PROVIDER OR SUPPLIER Oakview Skilled Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 3557 Campus Dr Thousand Oaks, CA 91360	

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 - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>32661</p> <p>Based on observation, interview and record review, the facility failed to ensure an opioid medication (pain medication that has a high risk of addiction) that was administered was documented on the appropriate record.</p> <p>This failure resulted in an inaccurate narcotic count and had the potential to result in diversion of a controlled medication.</p> <p>Findings:</p> <p>During a medication observation on 1/29/25 at 6 a.m. of Medication Cart 1, a narcotic blister pack (card with vacuum sealed medications) of Tramadol (opioid/pain medication that has a high risk for addiction and dependence [Schedule IV under the Controlled Substance Act]) 50 mg. was observed to contain 29 tablets.</p> <p>During a concurrent interview and record review on 1/29/25 at 6:05 a.m. with Licensed Nurse (LN 1), the Controlled Substances Declining Inventory Record or Narcotic Count Sheet/Log (Narcotic Log), dated 1/25/25 was reviewed. The Narcotic Log indicated, there were 30 tablets of Tramadol 50 in Medication Cart 1. Observation of Medication Cart 1 indicated, there were 29 tablets of Tramadol. LN 1 stated punched out the medication from the blister pack without signing the Narcotic Log causing the discrepancy between the Narcotic Log count and how many Tramadol tablets were actually remaining in the blister pack.</p> <p>During a concurrent observation, interview and record review on 1/29/25 at 6:12 a.m. with the Director of Nursing (DON), the Narcotic Log was reviewed. The blister pack of Tramadol in Medication Cart 1 was observed and the DON confirmed there were only 29 tablets of Tramadol and the Narcotic Log indicated, 30 Tramadol tablets. The DON stated, The medication should have been signed out.</p> <p>During a review of the facility's policy and procedure (P&P), titled 5.4 Inventory Control of Controlled Substances, revised 01/01/13, the P&P indicated in part, 1.2 Facility should ensure that the incoming and outgoing nurses count all Schedule II controlled substances and other medications with a risk of abuse or diversion at the change of each shift . and 2. Facility should ensure that Facility staff count all Schedule III-V controlled substances in accordance with Facility policy and Applicable Law.</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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