

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675018	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/17/2025
NAME OF PROVIDER OR SUPPLIER River Oaks Health and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2416 NW 18th St Fort Worth, TX 76106	

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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure that drugs and biologicals were stored in locked compartments and accessed only by authorized personnel for 1 of 4 residents (Resident #1) reviewed for medication storage.</p> <p>Resident #1 had two unidentified pills on his bedside table on 06/17/25 and did not self-administer his own medications.</p> <p>This failure could place residents at risk of inadequate therapeutic outcomes or decline in health.</p> <p>Findings included:</p> <p>Record review of Resident #1's face sheet dated 6/17/25 revealed a [AGE] year-old male admitted on [DATE]. His diagnoses included type 2 diabetes (the body has trouble controlling blood sugar and using it for energy), chronic kidney disease (a disease characterized by progressive damage and loss of function in the kidneys), heart failure (a chronic condition in which the heart doesn't pump blood as well as it should).</p> <p>Record review of Resident #1's annual MDS assessment dated [DATE] revealed a BIMS score of 8 out of 15 which indicated he was moderately impaired.</p> <p>In an observation and interview on 06/17/25 at 10:36 a.m. of Resident #1 in his room revealed two unidentified pills on his bedside table. Resident said that he was not aware of the pills on his left side bed table. He said they gave him too many pills and maybe one or two fell out when he was taking them.</p> <p>In an interview and observation on 06/17/25 at 10:36 a.m. the Wound Care nurse said the two pills should not be left at the resident's bedside. She said that she would take them out of the room. She removed both pills and put them in her biohazard bag. She stated the resident had been at risk of receiving a double dose of medication or taking medication without the knowledge of the facility.</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 06/17/25 at 11:00 a.m., the LVN stated she was the nurse for Resident #1. She said that she had given the resident pain medication at 09 AM and it was not time for more. She said she always goes to the right side of his bed and did not see the medication on the left side table. She said if she had she seen the two pills she would have taken them out of the room. She said the risk of medication at the bedside was that the resident could get double dosed.</p> <p>In an interview on 6/17/25 at 1:39 p.m. the acting DON said the expectation was that the nursing follow protocol to administer medication, watch them take the medication, if the resident refuse, document it and notify the doctor. She stated she had already started the in-service with the staff regarding administering medications. The risk to the resident when medication was left in the room would be that the resident could take the medication and have side effects, and no one would know that he had taken it or what he took. The person responsible to ensure medication was administered properly would be the nurse administering the medication.</p> <p>In an interview on 06/17/25 at 4:09 p.m. the Administrator said she the expectation was to administer the medication and watch the resident take the medication. If they refused, try again and if the resident refused again dispose of the medication properly. The risk was a potential side effects and could cause imbalance or worse sickness. The person responsible to ensure medication was administered properly would be the person passing medications. She stated they have already started doing in-service with the med aides and nurses and department heads to ensure they know not to leave medication in the room with a resident.</p> <p>Record review of the facility's undated Medication Administration policy read in part, .i.e. observes the resident take the medications</p> <p>Record review of the facility's Storage of Medication policy undated read in part, Medications and biologicals are stored safely, securely, and properly following manufacturer's recommendations or those of the supplier. The medication supply is accessible only to license nursing personnel, pharmacy personnel, or staff members lawfully authorized to administer medications.</p>