

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675396	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/26/2024
NAME OF PROVIDER OR SUPPLIER Laredo South Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1100 Galveston Laredo, TX 78040	

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>48633</p> <p>Based on observation, interview, and record review, the facility failed to ensure that drugs and biologicals were stored in locked compartments for 1 of 5 medication carts located at the nursing station observed for compliance.</p> <p>The facility failed to ensure one medication cart found at the nursing station for residents in the 500/600 hall was not left unlocked and unattended by RN A.</p> <p>This failure could place residents at risk of access and ingestion of non-narcotic medications.</p> <p>Findings were:</p> <p>During an observation on 9/24/2024, at 12:41 p.m., revealed one medication cart was unlocked at the nursing station without a supervised staff in view of the cart. The cart was left unlocked for less than 2 minutes until RN A returned to the cart, no one else was around the cart at the time, and all medications were non-narcotics.</p> <p>During an interview on 9/24/2024 at 12:41 p.m., RN A verbalized the unlocked cart was her cart. She verbalized she thought she locked it before walking to the kitchen. RN A stated it was proper process to lock the carts when the cart is not in view or when not being utilized. She also stated a resident could have accessed the medications in the drawers that were accessible.</p> <p>During an interview on 9/25/2024 at 1:08 p.m., the Director of Nursing (DON) stated it was the expectation of the facility for all staff passing medications to lock the medication carts. All carts are to be within the line of sight of the staff member utilizing the cart or locked. (He/she) stated locked carts prevent residents from obtaining access to improper medication.</p> <p>During an interview on 9/26/2024 at 12:305 p.m., the Administrator stated it was the policy of the facility to keep all medication carts locked. He stated following the policy keeps residents safe from receiving incorrect medication.</p> <p>A review of the Medication Carts and Supplies for Administering Meds policy dated 10/01/2019 revealed Do not leave the medication cart unlocked or unattended in the resident care areas. The cart must remain in your line of sight when it is not locked.</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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