

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675797	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/12/2024
NAME OF PROVIDER OR SUPPLIER Weston Inn Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 2505 S 37th St Temple, TX 76504	

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 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident's drug regimen must be free from unnecessary drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44317</p> <p>Based on interview and record review, the facility failed to ensure, based on the comprehensive assessment of a resident, residents who had not used psychotropic drugs were not given these drugs unless the medication was necessary to treat a specific condition as diagnosed and documented in the clinical record for 1 of 5 residents (Resident #48) reviewed for unnecessary medications.</p> <p>The facility failed to ensure Resident #48 had behavior monitoring for her prescribed Quetiapine (an antipsychotic medication used to treat schizophrenia), Sertraline (an antidepressant used to treat depression and anxiety), Trazodone (an antidepressant used to treat major depression), and hydroxyzine (an antianxiety/anticholinergic medication used to treat anxiety).</p> <p>The facility failed to ensure Resident #48 had side effect monitoring for her prescribed Sertraline, Trazodone, and hydroxyzine.</p> <p>These failures could place resident at risk of receiving unnecessary psychotropic medications with possible medication side effects, adverse consequences, and decreased quality of life.</p> <p>Findings included:</p> <p>Review of Resident #48's face sheet printed 04/11/24, reflected a [AGE] year-old female initially admitted to the facility 07/26/21. Her diagnoses included hemiplegia (paralysis of one side of the body), Type 2 diabetes (a condition that affects the way the body processes blood sugar), insomnia (trouble falling and/or staying asleep), psychotic disorder with hallucinations due to known physiological condition (altered thinking, perceptions, and behavior), anxiety disorder (intense and excessive worry and fear), and major depressive disorder - recurrent - severe with psychotic symptoms (severe, persistent feeling of sadness and loss of interest with delusions (false beliefs) and/or hallucinations (an experience of seeing, hearing, feeling, or smelling something that does not exist) with themes of guilt and worthlessness).</p> <p>Review of Resident #48's quarterly MDS assessment dated [DATE], Section C (Cognitive Patterns) reflected a BIMS score of 15 indicating intact cognition. Section D (Mood) reflected no mood indicators and no feelings of social isolation. Section E (Behavior) reflected no hallucinations or delusions and no other behavioral symptoms. Section N (Medications) reflected the use of antipsychotic and antidepressant medications. Section N did not indicate the use of antianxiety medications.</p> <p>Review of Resident #48's Physician's Order Listing Report reflected the following orders:</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 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>04/01/24 Hydroxyzine HCl oral tablet 25 mg - give 1 tablet by mouth two times a day for anxiety.</p> <p>02/18/24 Quetiapine Fumarate oral tablet 50 mg - give 1 tablet by mouth at bedtime related to anxiety disorder, psychotic disorder.</p> <p>04/01/24 Sertraline HCl oral tablet 50 mg - give 1 tablet by mouth one time a day related to major depressive disorder.</p> <p>04/09/24 Trazodone HCl oral tablet 100 mg - give 1 tablet by mouth at bedtime for insomnia.</p> <p>04/05/24 Side Effects - Antipsychotic: chart all appropriate codes - 0-none, 1-sedation/drowsiness, 2-increased falls/dizziness, 3-hypotension, 4- anxiety/agitation . 22-other every shift.</p> <p>Review of Resident #48's Physician's Order Listing Report did not reflect any orders for monitoring side effects of the antidepressant or antianxiety medications.</p> <p>Review of Resident #48's Physician's Order Listing Report did not reflect any orders for monitoring effectiveness or behaviors related to the use of the antipsychotic, antidepressant, or antianxiety medications.</p> <p>Review of Resident #48's MAR for April 2024 reflected she had received the Hydroxyzine, Quetiapine, Sertraline, and Trazodone as ordered. Further review of the MAR reflected the resident was monitored each shift for side effects of the antipsychotic medication. A check mark and initials indicated the task was completed but the number for the corresponding code (0-none, 1-sedation/drowsiness, 2-increased falls/dizziness, 3-hypotension, 4- anxiety/agitation . 22-other) was not documented. The MAR did not reflect any monitoring of effectiveness or behaviors related to the antipsychotic medication. The MAR did not reflect any monitoring for side effects, effectiveness, or behaviors for the antidepressants or antianxiety medications.</p> <p>Review of Resident #48's pharmacist medical record review, dated 03/25/24, reflected, The resident takes psychoactive medications. Please add behavior/side effect monitoring for: Hydroxyzine, Quetiapine, Sertraline, and Trazodone.</p> <p>An observation on 04/09/24 at 1:16 PM, revealed Resident #48 sitting up in her room in no acute distress.</p> <p>During an interview on 04/11/24 at 1:06 PM, the DON stated Resident #48 should have had monitoring for her psychotropic medications because, She has been on the medication forever. She stated everyone on psychotropic medications was supposed to be monitored for side effects and behaviors related to each psychotropic medication.</p> <p>During an interview on 04/11/24 at 4:05 PM, the DON stated she and the ADON were responsible for following up on pharmacy recommendations. She stated it was her expectation that recommendation follow ups were completed within seven days. The DON stated not following up on recommendations such as monitoring behaviors or side effects could cause adverse outcomes.</p> <p>(continued on next page)</p>		

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<p>F 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the facility policy, Psychotropic Medication Use dated July 2022, reflected in part, 2. Drugs in the following categories are considered psychotropic medications and are subject to prescribing, monitoring, and review requirements specific to psychotropic medications: a. anti-psychotics; b. anti-depressants; c. anti-anxiety medications; and d. hypnotics. 3. Residents, families and/or the representative are involved in the medication management process. Psychotropic medication management includes d. adequate monitoring for efficacy and adverse consequences. 7. Categories of medications which affect brain activity such as antihistamines, anticholinergic medications and central nervous system medications that are prescribed as a substitute for or an adjunct to a psychotropic medication are monitored and managed as psychotropic medications. 13. Residents receiving psychotropic medications are monitored for adverse consequences, including: a. anticholinergic effects . b. cardiovascular effects . c. metabolic effects . d. neurologic effects . e. psychosocial effects .</p>