

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675818	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/06/2024
NAME OF PROVIDER OR SUPPLIER Park Manor of Cyfair		STREET ADDRESS, CITY, STATE, ZIP CODE 11001 Crescent Moon Dr Houston, TX 77064	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38644</p> <p>Based on observation, interview, and record review the facility failed to ensure the resident's right to a safe, clean, comfortable, and homelike environment, for 3 of 6 residents (Resident #19, Resident #47, and Resident #13) reviewed for residents' rights.</p> <p>The facility failed to keep Resident #19's and Resident #47's room free of trash.</p> <p>The facility failed to keep Resident #13's wall clean.</p> <p>These failures could place residents at risk of an unsanitary environment.</p> <p>Findings included:</p> <p>Record review of Resident #47's face sheet dated 6/6/24 revealed a [AGE] year-old male who admitted on [DATE]. His diagnoses included type 2 diabetes, major depressive disorder, and adjustment disorder with mixed disturbance of emotions and conduct.</p> <p>Record review of Resident #47's quarterly MDS assessment dated [DATE] revealed a BIMS score of 9 out of 15 which indicated moderate cognitive impairment. He required assistance from staff with ADL care.</p> <p>Record review of Resident #47's care plan updated 6/4/24 revealed the resident had a behavior problem related to keeping his room unclean due to leaving trash from snacks around room. Interventions were to anticipate and meet the resident's needs. Intervene as necessary to protect the rights and safety of others.</p> <p>In an observation on 6/4/24 at 10:29 a.m. of Resident #47's room revealed there were crumbs on the floor under the bed near the wall including a sugar packet, opened straw, and other debris.</p> <p>In an observation on 6/4/24 at 10:54 a.m. of Resident #47's room revealed the crumbs were still on the floor with the addition of an opened snack wrapper.</p> <p>In an observation and interview on 6/4/24 at 1:33 p.m. in Resident #47's room revealed a fly was flying around. The crumbs from previous observations were still on the floor. The resident said housekeepers cleaned his room and the facility always had flies.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an observation on 6/5/24 at 3:16 p.m. in Resident #47's room revealed the crumbs were still on the floor under the bed near the wall.</p> <p>In an observation and interview on 6/6/24 at 10:43 a.m. with the Housekeeping Manager of Resident #47's room revealed trash was underneath his bed. The Housekeeping Manager said she did not like the condition of Resident #47's room and said it did not appear to be swept good. She said the trash on the floor could cause ants, slipping or falling.</p> <p>Record review of Resident #19's face sheet dated 6/6/24 revealed an [AGE] year old male who admitted on [DATE]. His diagnoses included chronic obstructive pulmonary disease (a chronic inflammatory lung disease that causes obstructed airflow from the lungs), unspecified psychosis, dementia, and anxiety disorder.</p> <p>Record review of Resident #19's quarterly MDS assessment dated [DATE] revealed a BIMS score of 9 out of 15 which indicated moderate cognitive impairment. He required assistance from staff with ADL care.</p> <p>In an observation on 6/4/24 at 1:30 p.m. of Resident #19's closet revealed there were food crumbs and a cup with tan liquid on the floor. The tan liquid was also on the wall.</p> <p>In an observation on 6/5/24 at 3:15 p.m. of Resident #19's closet revealed the crumbs and liquid were still present.</p> <p>In an observation and interview on 6/6/24 at 10:27 a.m. of Resident #19's closet with LVN A, he said the substance on Resident #19's wall and floor appeared to be formula and crumbs. He said the resident might have finished the formula and threw it in the closet. He said the closet should not look like that because it was supposed to be clean, and it could bring ants. He said the housekeeper was responsible to clean the entire room and may not have opened the closet.</p> <p>In an observation and interview on 6/6/24 at 10:43 a.m. of Resident #19's closet with the Housekeeping Manager revealed a tan liquid substance on the floor and wall, along with food crumbs. The Housekeeping Manager said the area appeared to be a drink that spilled down the wall. She said it was dirty and needed to be cleaned.</p> <p>Record review of Resident #13's face sheet dated 6/6/24 revealed a [AGE] year-old female who admitted on [DATE]. Her diagnoses included dementia, heart failure, bipolar disorder, and schizophrenia (a mental disorder characterized by delusions, hallucinations, disorganized thoughts, speech and behavior).</p> <p>Record review of Resident #13's quarterly MDS assessment dated [DATE] revealed a BIMS score of 2 out of 15 which indicated severe cognitive impairment. She was dependent on staff for ADL care.</p> <p>In an observation on 6/4/24 at 10:48 a.m. in Resident #13's room revealed there was a brown area smeared on the wall above Resident #13's bed.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an observation and interview on 6/6/24 at 10:43 a.m. of Resident #13's wall with the Housekeeping Manager revealed a brown colored smear above the resident's bed. The Housekeeping Manager said the spot appeared to be a bug or blood from a bug that should not be there. She said she started at the facility on Monday (6/3/24) and was identifying areas that they needed to improve on. She said housekeeping staff were expected to sweep and mop the floors, clean the walls, bathroom, furniture, and bedside trays and were responsible for anything that needed to be cleaned. She said she expected the facility to be clean. She said she was responsible for ensuring the facility was clean but was still getting acclimated.</p> <p>In an observation and interview on 6/6/24 at 11:06 a.m. the Administrator and this Surveyor observed the areas of concern in Resident #19, Resident #47, and Resident #13's room. She said the areas needed attention and should be cleaned right away. She said she expected the resident rooms to be maintained and clean due to infection control and quality. She said department heads were expected to conduct room rounds and report any concerns to housekeeping. She said the Housekeeping Manager was brand new and the facility transitioned to a new housekeeping company on Saturday (6/1/24) due to quality concerns with the previous company. She said she and the Housekeeping Manager were responsible for ensuring the rooms were clean.</p> <p>Record review of the facility's Quality of Life - Homelike Environment policy dated August 2009 read in part, . Residents are provided with a safe, clean, comfortable, and homelike environment and encouraged to use their personal belongings to the extent possible .Characteristics of a personalized, homelike setting 2. The facility staff and management shall maximize, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include: a. cleanliness and order .</p>