

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675899	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/18/2024
NAME OF PROVIDER OR SUPPLIER Matagorda Nursing & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 4521 Ave F Bay City, TX 77414	

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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48863</p> <p>Based on observations, interviews, and record review the facility failed to provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of 1 of 30 residents reviewed for pharmaceutical services</p> <p>The facility failed to administer Resident (#2) scheduled medication (Prednisone 40 mg) with the correct dosage according to physician orders.</p> <p>This failure could affect the resident by not receiving a therapeutic dose and could prevent the resident from receiving the highest possible benefit from their medication.</p> <p>Findings included:</p> <p>Record review of [AGE] year-old male resident with history of hemiplegia (paralysis that affects only one side of your body) of right side, altered mental status (comprises a group of clinical symptoms rather than a specific diagnosis, and includes cognitive disorders, attention disorders, arousal disorders, and decreased level of consciousness), and traumatic brain injury (an injury that affects how the brain works) with recent diagnosis of Pneumonia (an infection that inflames the air sacs in one or both lungs) on 04/13/24. His most recent MDS 03/01/24 revealed BIMS summary score of a 0 (severe impairment), and he was non-interviewable.</p> <p>Record review of Physician Orders on 04/17/24, revealed: Prednisone give 20 milligrams (2 tabs =40mg) by mouth one time a day for 5 Days. The eMAR read to administer Prednisone 40mg by mouth one time a day for 5 Days. Give 2 tabs (40mg) tab. After the state surveyor interview with the MA, the order was changed to Prednisone oral tab 20mg: Give 1 tablet by mouth two times a day related to Pneumonia.</p> <p>Observation and interview on 04/17/24 at 2:37 p.m. with MA A revealed only (1) Prednisone 20 mg tablet missing from the blister pack while doing medication cart check. The instructions on blister pack read to administer Prednisone (2) 20 mg tablets by mouth one time a day. MA A said, she should have administered both prednisone 20 mg tablets to equal a total of Prednisone 40 mg, instead of just (1) 20 mg tab. She said, the risk of not getting his full dosage is that it was not meeting the requirements that was ordered by the physician.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on 04/18/24 at 10:50 a.m., the DON said, MA A didn't fully read the entire order and only administered (1) Prednisone 20mg tab. She said, we spoke with the physician yesterday, and the order was changed to Prednisone 20 mg BID. The risk of not receiving their full medication dosage was that the medication would not be effective. The DON said, the staff was in-serviced annually and during onboarding on medication administration. The State Surveyor asked if MA B had competencies and a skilled checklist on medication administration. However, the DON stated she was unable to find the employees onboarding competencies and/or medication checklist.</p> <p>Record review of the facility's Medication Administration Procedures policy (revised 10/25/17) read in part, . (14. A specific order must be obtained from the Physician to change the dosage form of a resident's medication. 15. Medication errors and adverse drug reactions are immediately reported to the resident's physician. In addition, the Director of nurses and/or designee should be notified of any medication errors. Any medication error will require a medication error report that includes the error and actions to prevent reoccurrence. 20. The 10 rights of medication should always be adhered to 1. Right patient, 2. Right medication 3. Right dose 4. Right route 5. Right time 6. Right patient education 7. Right documentation 8. Right to refuse 9. Right assessment 10. Right evaluation .</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46678</p> <p>Based on observations, interviews, and record review, the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety for 1 of 1 kitchen.</p> <p>Three dented cans were on the can rack located in the dry storage room.</p> <p>This deficient practice could place 49 residents who received meals from the main kitchen at risk for food borne illness.</p> <p>Findings included:</p> <p>Observation on 4/16/24 at 8:45 am of the dry storage room revealed the following:</p> <ul style="list-style-type: none"> -One 108 oz can of yams with a small dent in the middle of the can -One 66.5 oz can of tuna with a large dent at the top of the seam -One 104 oz can of fruit cocktail with a small dent at the top of the seam <p>Interview with the Dietary Manager on 4/16/24 at 8:48 am confirmed the dented cans should have been stored away from the dry storage with the other dented cans.</p> <p>Interview with the Dietary Manager on 4/17/24 at 1:40 pm she said she conducted an in-service with the dietary staff on dented cans. She said the risk to the resident would be exposure to botulism. She said the dietary staff should check for dented cans when the groceries were received on Thursdays, and she went behind staff and checked the cans.</p> <p>Interview on 4/17/24 at 2:07 pm with Dietary Aide A, she said she had worked for the facility for over a year. She said she was in-serviced on dented cans and the in-service was conducted by the Dietary Manager. She said the dented cans in the pantry were overlooked. She said the risk to the resident could cause botulism.</p> <p>Interview on 4/17/24 at 2:09 pm with Dietary Aide B, she had worked at the facility for [AGE] years. She said the in-service was on dented cans. She said dietary staff were not supposed to use dented cans because the resident could get botulism.</p> <p>Interview on 4/17/24 at 2:11 PM with Dietary Cook, she had worked at the facility for 4 months. She said the in-service was on dented cans. She said the dented cans had to be stored away from the dry storage. She said the Dietary Manager is supposed to double check the cans. She said the risk to the resident could expose them to botulism.</p> <p>(continued on next page)</p>

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F 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Record review of the Dietary Services Policy & Procedure Manual dated 2012 under section Food Safety read in part . dented or otherwise damaged cans will not be used unless inspected by the dietary service manager and found not to be dented on the top or seam, and not perforated . dented cans will be stored in a separate location and returned to the food vendor for credit .		