

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676008	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/30/2024
NAME OF PROVIDER OR SUPPLIER Silsbee Oaks Health Care LLP		STREET ADDRESS, CITY, STATE, ZIP CODE 920 E Ave L Silsbee, TX 77656	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 32217</p> <p>Based on interview and record review, the facility failed to provide services as outlined by the comprehensive care plan, to meet professional standards of quality for consultation with the resident's physician when there was a significant change in the resident's condition or a need to alter treatment significantly for 1 (Resident #13) of 29 residents reviewed for following physician's orders.</p> <p>The facility failed to implement Resident #13's care plan when the blood pressure and/or heart rate was below prescribed parameters and did not notify the physician in October 2024. (10/07, 10/8, 10/15, 10/16, 10/21, 10/23, 10/25, 10/26, and 10/28).</p> <p>Th failure placed residents, who required blood pressure and heart rate monitoring, at risk for complications due to delayed physician intervention.</p> <p>Findings included:</p> <p>Record review of Resident #13's clinical record indicated she was admitted on [DATE], was [AGE] years old with diagnosis which included hypertension (high blood pressure).</p> <p>Record review of the quarterly MDS assessment dated [DATE] indicated Resident #13 had a BIMS score of 08 which indicated cognition was moderately impaired. She had a diagnosis of hypertension.</p> <p>Review of Resident #13's care plan dated 07/02/24 indicated the resident had diagnosis of hypertension and was at risk for decreased cardiac output (a state in which your heart does not pump enough blood to supply your organs and tissues with adequate oxygen), activity intolerance from weakness, and ineffective coping. The interventions included administering anti-hypertensive medications as ordered. Monitor for side effects such as orthostatic hypotension (a sudden drop in blood pressure when you stand from a seated or prone position) and increased heart rate and effectiveness.</p> <p>Record review of physician orders dated October 2024 indicated Resident #13 was prescribed carvedilol 12.5 mg (used to lower blood pressure) twice daily for hypertension. Hold for blood pressure less than 110/60; and hold for heart rate below 60.</p> <p>Record review of the MAR dated October 1 - 29, 2024 indicated on the following dates at 8:00 a.m. and at 5:00 p.m., Resident #13's carvedilol 12.5 mg was held and there was no indication in the electronic clinical record the physician had been notified :</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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>10/07/24 at 5:00 p.m., B/P (blood pressure) was 94/54,</p> <p>10/08/24 at 8:00 a.m., B/P was not recorded but coded as held,</p> <p>10/14/24 at 5:00 p.m., B/P was 100/56,</p> <p>10/15/24 at 8:00 a.m., B/P was not recorded but coded as held,</p> <p>10/16/24 at 8:00 a.m., B/P was not recorded but coded as held,</p> <p>10/16/24 at 5:00 p.m., B/P was 116/56,</p> <p>10/21/24 at 8:00 a.m., B/P was not recorded but coded as held,</p> <p>10/23/24 at 5:00 p.m., B/P was 120/47,</p> <p>10/25/24 at 5:00 p.m., B/P was 117/56,</p> <p>10/26/24 at 8:00 a.m., B/P was 113/46, and</p> <p>10/28/24 at 5:00 p.m., B/P was 113/56 and heart rate was 56.</p> <p>Record review of the nurse's notes for Resident #13 dated October 3 through October 29, 2024, gave no indication of notifying the physician of the blood pressure medication being held for 11 of 57 opportunities.</p> <p>During an interview on 10/30/24 at 9:00 a.m., MA B said she would obtain resident vital signs prior to blood pressure medication administration, and if medication were held due to being outside prescribed parameters, she would alert the charge nurse. MA B said the charge nurse would then assess residents and recheck their blood pressure with a manual cuff.</p> <p>During an interview and record review on 10/30/24 at 8:40 a.m., LVN A reviewed Resident #13's current electronic MAR and acknowledged the B/P medication was held on multiple occasions in October due to B/P being out of parameters prescribed by the physician. LVN A said the nurses were responsible for notifying the physician after B/P medication was held 3 times or more. She added the DON and ADON were responsible for ensuring the physician had been notified. Nurses were educated to notify physicians when medications were held. LVN A said Resident #13's had been overlooked and she would notify immediately. The risk was medication may not be therapeutic if physician not notified when held so adjustments may be made to dosages.</p> <p>During an interview and record review on 10/30/24 at 9:00 a.m., the DON said her expectations were for residents with prescribed parameters for administration of medications to have documentation of those vital signs. She added she will conduct weekly chart audits, and it was her responsibility to assure accuracy of resident's clinical records. She acknowledged Resident #13's October MAR indicated B/P medications were held on multiple occasions. She said the physicians or Nurse Practitioners visited facility weekly or bi-weekly and were made aware of any concerns with residents during their visits unless there was an emergency.</p> <p>(continued on next page)</p>		

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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a joint interview on 10/30/24 at 12:00 p.m., the DON and ADON said they were responsible for ensuring the physician was notified when medications were being held. They were overlooked. They said they would in-service staff and start running a report in the electric medical record system weekly/monthly to ensure physician notification of any medication that was consistently held or refused. She said the risk was that the medication may not be therapeutic if the physician was not notified when held.</p> <p>Record review of the policy Specific Medication Administration Procedures dated August 2019 indicated . P. Notification of Physician/Prescriber: 2) Held medications for pulse, blood pressure, low or high blood sugar, or other abnormal test results, vital signs, resulting in medications being held.</p>

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<p>F 0790</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide routine and 24-hour emergency dental care for each resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 33460</p> <p>Based on observation, interview, and record review, the facility failed to provide or obtain from an outside source dental service to meet the needs of 1 of 29 residents reviewed for dental services. (Resident #132)</p> <p>The facility did not assist Resident #132, who had missing teeth and dental decay, with a dental service consult.</p> <p>This failure could place the residents at risk for not receiving care and services to maintain their highest practicable mental, physical, and psychosocial well-being.</p> <p>Findings included:</p> <p>Record review of an admission record dated 10/30/24 indicated Resident #132 admitted on [DATE] and was [AGE] years old with diagnoses of high blood pressure, diabetes (disease results in too much sugar in the blood), and peripheral vascular disease (chronic condition when blood vessels become block).</p> <p>Record review of an admission document dated 05/21/24 for Resident #132 indicated no concerns with his teeth.</p> <p>Record review of a quarterly MDS assessment dated [DATE] for Resident #132 did not indicate any problems with his oral health. His BIMS indicated he was cognitively intact. He required set up assistance of staff for oral care.</p> <p>Record review of the care plan dated 09/05/24 indicated Resident #132 was independent with his oral care and no mention of dental problems.</p> <p>During an observation and interview on 10/28/24 at 8:53 a.m., Resident #132 said he had not seen a dentist in a long time and needed an appointment. He opened his mouth and said, I am missing some teeth. There were some teeth on the lower jaw that were deteriorated. He denied being in pain or difficulty in chewing his food.</p> <p>During an interview on 10/29/24 at 10:00 a.m., the SW said she was responsible for making the appointments for the residents to see the dentist. She said Resident #132 had not complained to her and none of the nursing staff had reported he had a need for dental consult. She said they have a dentist to send residents too if they have dental issues. She said nurses normally let her know. She said Resident #132 had Medicaid so she would get him an appointment.</p> <p>During an interview on 10/29/24 at 10:55 a.m., the DON said Resident #132's teeth should have been assessed on admission and quarterly. She said we should have addressed that during care plan meetings.</p> <p>(continued on next page)</p>		

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<p>F 0790</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 10/30/24 at 8:57 a.m., the DON said she had observed Resident #132's teeth after surveyor intervention and said the nurses should have referred him to the social worker for missing and deteriorated teeth.</p> <p>During an interview on 10/30/24 at 10:25 a.m., LVN C said she looked at the residents' teeth while making rounds. She said if the resident complained of issues or pain, she would refer them to the SW. She said Resident #132 performed his own oral care himself. LVN C said she had not seen any missing teeth or cavities but if he needed an appointment, she would tell the social worker.</p> <p>During an interview on 10/30/24 at 9:30 a.m., the Administrator said her expectations were for the residents to be referred to the dentist as needed.</p> <p>Record review of the policy dated 08/14/17 titled Dental Care indicated Resident assessed and assisted with dental care needs to help maintain their nutritional needs and promote oral hygiene. Residents will be assessed by nursing personnel for dental care needs at admission and as needed. Referrals for professional dental care needs will be facilitated by the facility according to resident'/ resident' representatives' preference.</p>		