

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676158	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/14/2024
NAME OF PROVIDER OR SUPPLIER Sonterra Health Center		STREET ADDRESS, CITY, STATE, ZIP CODE 18514 Sonterra Place San Antonio, TX 78258	

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 0732</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Post nurse staffing information every day.</p> <p>41937</p> <p>Based on observations, interviews, and record reviews the facility failed to post the following information on a daily basis:</p> <p>Facility name, the current date, the total number, and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: Registered nurses, Licensed practical nurses, Certified nurse aides, and Resident census. For 1 of 1 daily nursing staff posting.</p> <p>The facility failed to coordinate the generation and posting of the nursing daily staffing report.</p> <p>This deficient practice could deny residents and visitors nurse staffing information readily available in a readable format at any given time.</p> <p>The findings included:</p> <p>During an observation on 06/13/2024 at 01:00 AM revealed the facility's Daily Nursing Care Hours public posting hung on the wall behind the nurse's station. Further observation revealed the posting was dated Tuesday 06/11/2024.</p> <p>During an interview on 06/13/2024 at 01:30 PM the ADON stated the posting should be daily.</p> <p>During an interview on 06/14/2024 at 06:00 PM the Administrator stated CNA D was the scheduling coordinator and was responsible for generating and posting the facility's Daily Nursing Care Hours public posting and failed to coordinate the task to fell ow team members when CNA D had scheduled time off. The Administrator stated the lack of a daily posting could deny residents and visitors nurse staffing information readily available in a readable format at any given time.</p> <p>A record review of the facility's Nursing Staffing Information policy, dated 05/2007, revealed, It is the policy of this facility to post the nurse staffing data in a clear and readable format in a prominent place accessible to residents and visitors on a daily basis at the beginning of each shift.</p> <p>PROCEDURES:</p> <p>Data must be posted as follows:</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 0732</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<ol style="list-style-type: none"> 1. Daily the Staffing Coordinator or designee will post nurse staffing data. 2. The posting will be in a clear and readable format. 3. The staffing data will be in a prominent place readily accessible to residents and visitors. 4. The data will be accessible to the public. 5. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>41937</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>Based on observations, interviews, and record reviews the facility failed to ensure all drugs and biologicals were stored in locked compartments under proper temperature controls and permit only authorized personnel to have access to the keys, for 3 (100 Hall medication aide cart, nurse medication cart, and treatment cart) of 8 medication and treatment carts reviewed for drugs and biologicals were stored in locked compartments.</p> <p>The 100-hall medication aide cart, the nurse medication cart, and the treatment cart were unlocked and unsupervised.</p> <p>This failure could place residents at risk for harm by unsecured and uncontrolled medications.</p> <p>The findings included:</p> <p>During an observation on 06/13/2024 at 12:51 AM revealed the 100-hall nurse LVN A seated at the nurses' station documenting at the computer. Further observation revealed the medication aide cart, nurse medication cart, and treatment cart positioned at the near end of the 100-hall. All 3 carts were observed to be out of LVN A's line of sight. All 3 carts were unattended and unlocked. 1 of the 3 medication carts had approximately 15 medication cards sitting atop of the unlocked, unattended medication cart. Further observation revealed the medication cards contained approximately 30 pills each for an estimated total of 450 pills.</p> <p>During an observation on 06/13/2024 at 01:10 AM revealed LVN A securing the medication cards into the medication cart and then locking all three carts.</p> <p>During an interview on 06/13/2024 at 01:15 AM LVN A stated I know, it's a bad habit to leave the carts unlocked. I just have a lot to do with 2 halls.</p> <p>During an interview on 06/13/2024 at 02:00 AM the ADON stated the medication carts were to be locked whenever the medication carts were not attended. The ADON stated the risk for residents was the potential harm by not having medications secured and controlled.</p> <p>During an interview on 06/14/2024 at 06:00 PM the Administrator stated all medications should be secured and medication carts were to be secured whenever unattended. The Administrator stated the risk for residents was the potential harm by not having medications secured and controlled.</p> <p>A record review of the facility's Medication Access and Storage policy, dated 05/2007, revealed, It is the policy of this facility to store all drugs and biological in locked compartments under proper temperature controls. The medication supply is accessible only to licensed nursing personnel, pharmacy personnel, or staff members lawfully authorized to administer medications: PROCEDURES: .Only licensed nurses, the consultant pharmacist and those lawfully authorized to administer medications (e.g., medication aides) are allowed access to medications. Medication rooms, carts, and medication supplies are locked or attended by persons with authorized access</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>41937</p> <p>Based on observations, interviews, and record reviews the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety for 1 of 10 snacks reviewed for preparation, distribution, and storage.</p> <p>The facility prepared and distributed sandwiches without labeling the sandwiches with the dates they were prepared and the dates the foods should not be served and thrown out.</p> <p>This deficient practice could place residents at risk for food borne illnesses.</p> <p>The findings included:</p> <p>During an observation on 06/13/2024 at 01:10 AM revealed a sandwich wrapped in clear plastic cling wrap stored at room temperature on a plastic tray on a wheeled shelf table. Further observation revealed the sandwich was not labeled in any fashion.</p> <p>During an interview on 06/13/2024 at 01:15 AM CNA B stated sandwiches were prepared and delivered to the hallway snack carts by kitchen staff. CNA B stated the sandwich on the snack cart was not labeled with any information. CNA B stated the sandwich was not safe to serve due to the lack of information. She stated, I don't know how old the sandwich is. CNA B stated she would dispose of the sandwich.</p> <p>During an interview on 06/13/2024 at 06:10 PM the Food Service Manager stated all snacks prepared by the kitchen should have been labeled with 2 dates - the date the snack was prepared and the date it was no longer safe to serve . The FSM stated she had provided the kitchen staff with re-enforced training for food and resident safety regarding the mandatory labeling of snacks prepared and distributed by the kitchen.</p> <p>A record review of the facility's undated Food Preparation and Storage policy, revealed, It is the policy of this facility to properly date and label food for resident consumption .Food or beverage items without a manufacturer's expiration date should be dated upon arrival in the facility and thrown away three days after the date marked. Foods in unmarked or unlabeled containers should be marked with the current date the food item was stored. Food prepared for resident consumption, such as snacks, that aren't in the original packaging should be dated and labeled before being presented to the residents to eat. Any suspicious or obviously contaminated food or beverages should be thrown away immediately</p> <p>A record review of the United States Food and Drug Administrations 2022 Food code accessed 06/17/2024, revealed, On-premises preparation; Prepare and hold cold .Ready-to-Eat, Time/Temperature Control for Safety Food, Date Marking .refrigerated, READY-TO-EAT, TIME/TEMPERATURE CONTROL FOR SAFETY FOOD prepared and held in a FOOD ESTABLISHMENT for more than 24 hours shall be clearly marked to indicate the date or day by which the FOOD shall be consumed on the PREMISES, sold, or discarded when held at a temperature of 5 C (41 F) or less for a maximum of 7 days. The day of preparation shall be counted as Day 1.</p>		