

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676188	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/01/2025
NAME OF PROVIDER OR SUPPLIER Millbrook Healthcare and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1850 W Pleasant Run Rd Lancaster, TX 75146	
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)		
F 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide safe and appropriate respiratory care for a resident when needed. (continued on next page)		

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676188	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/01/2025
NAME OF PROVIDER OR SUPPLIER Millbrook Healthcare and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1850 W Pleasant Run Rd Lancaster, TX 75146	
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 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, and record review the facility failed to make sure that residents receive adequate respiratory care (including tracheostomy care and tracheal suctioning) for 3 of 5 Residents (Resident#1, Resident#2 and Resident#3), reviewed for infection control. The facility failed to ensure that Resident #1, Resident #2 and Resident #3's oxygen tubing and prefilled humidifier water bottles were changed and dated. The facility failed to ensure that Resident #3's oxygen tubing was bagged in a plastic bag and stored in a drawer. The failures had the potential to affect residents receiving oxygen therapy by increasing their risk of health -associated infections. Findings included: Record review of Resident 1#s Quarterly MDS Assessment, dated 09/01/, 2025 reflected the resident was a [AGE] year-old male, had a BIMs score of 07 indicating he was cognitively impaired. The resident had diagnoses which included Renal Insufficiency (poor function of the kidneys that may be due to a reduction in blood-flow to the kidneys caused by renal artery disease), Diabetes Mellitus (is a condition that happens when your blood sugar is too high. It develops when your pancreas doesn't make enough insulin or any at all, or when your body isn't responding to the effects of insulin properly. Diabetes affects people of all ages. Most forms of diabetes are chronic (lifelong), and all forms are manageable with medications and/or lifestyle changes.), Non-Alzheimer's Dementia (syndrome associated with many neurodegenerative diseases, characterized by a general decline in cognitive abilities that affects a person's ability to perform everyday activities. This typically involves problems with memory, thinking, behavior, and motor control) Asthma (asthma is a condition that causes long-term (chronic) inflammation in your airways. The inflammation makes them react to certain triggers, like pollen, exercise or cold air. During these attacks, your airways narrow (bronchospasm), swell up and fill with mucus. This makes it hard to breathe or causes you to cough or wheeze. Without treatment, these flare-ups can be fatal.) Record review of Resident #1's Comprehensive Care Plan, Date Initiated: 12/18/2024 and Revision on: 12/18/2024 reflected the resident had Oxygen/BIPAP Therapy r/t Respiratory illness. Facility intervention includes: BIPAP PER ORDERS. Encourage or assist with ambulation as indicated. Give medications as ordered by physician. Monitor/document side effects and Effectiveness. Monitor for s/sx of respiratory distress and report to MD. Record review of Resident #1's Physician orders start date 01/08/2025 reflected O2 at 2 l/min continuous per nasal cannula every shift for COPD related to chronic obstructive pulmonary disease (ongoing lung condition caused by damage to the lungs. The damage results in swelling and irritation, also called inflammation, inside the airways that limit airflow into and out of the lungs. This limited airflow is known as obstruction. Symptoms include trouble breathing, a daily cough that brings up mucus and a tight, whistling sound in the lungs called wheezing). Record review of Resident 2#'s Quarterly MDS Assessment, dated 09/04/2025, reflected the resident was a [AGE] year-old female, had a BIMs score of 14 indicating she was cognitively intact. The resident had diagnoses which included anemia (Anemia is a blood disorder that happens when you don't have enough red blood cells or your red blood cells don't work as they should. Some types of anemia are inherited, but people may also acquire or develop the condition during their lifetimes), respiratory failure (Respiratory failure is a condition where you don't have enough oxygen in the tissues in your body (hypoxia) or when you have too much carbon dioxide in your blood (hypercapnia). You might also hear people use the term acute hypoxemic respiratory failure (AHRF) to describe it.), chronic respiratory failure with HYP (Respiratory failure is a condition where you don't have enough oxygen in the tissues in your body (hypoxia) or when you have too much carbon dioxide in your blood (hypercapnia). You might also hear people use the term acute hypoxemic respiratory failure (AHRF) to describe it.), and asthma (Asthma is a condition that causes long-term (chronic) inflammation in your airways. The inflammation makes them react to certain triggers, like pollen, exercise or cold air. During these attacks, your airways narrow (bronchospasm), swell up and fill with mucus. This makes it hard to breathe or causes you to cough or wheeze. Without treatment, these flare-ups can be fatal). Record review of Resident #2's Comprehensive Care Plan, Date Initiated: 07/29/2025: Has Oxygen Therapy. Facility interventions: Give medications as ordered by physician. Monitor/document side effects and effectiveness, If the resident is allowed to eat, oxygen still must be given to the resident but in a different manner (e.g., changing from mask to a nasal cannula). Return resident to the usual oxygen delivery method after the meal. Monitor for s/sx of respiratory distress and report to MD PRN. Record review of Resident #2's Physician's orders start date 05/04/2025 reflected change O2 tubing & humidifier bottle every night shift every Sun Record review of Resident 3#'s</p>		