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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676249 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 08/22/2025 |
| NAME OF PROVIDER OR SUPPLIER The Carlyle at Stonebridge Park | | STREET ADDRESS, CITY, STATE, ZIP CODE 170 Stonebridge Lane Southlake, TX 76092 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) |
| <p>F 0684</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0684</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure that residents receive treatment and care in accordance with professional standards of practice, the comprehensive assessment of a resident for 1 of 5 residents (Resident #1) reviewed for quality of care. The facility failed to ensure Resident #1's catheter/catheter balloon remained in place in the bladder. On 08/04/25, the resident had a change in condition, and the NP ordered bloodwork, a UA, and a catheter change. During the catheter change, Resident #1 began to bleed from the catheter site and a few hours later, labs from the bloodwork came back critical and was sent to the hospital. Resident #1 was diagnosed with acute kidney failure and trauma to the urethra due to the catheter balloon not being in the right location. An Immediate Jeopardy (IJ) was identified on 08/21/25 at 4:55 PM. The IJ template was provided to the facility on [DATE] at 5:10 PM. While the IJ was removed on 08/22/25, the facility remained out of compliance at a scope of isolated and a severity level of potential for more than minimal harm due to the facility continuing to monitor the implementation and effectiveness of their Plan of Removal. This failure could place residents at risk for an adverse outcome to resident care or services and may also include the potential for physical and psychosocial harm. Findings included: Record review of Resident #1's quarterly MDS assessment dated [DATE] reflected the resident was a [AGE] year-old male admitted to the facility on [DATE]. His diagnoses included stroke (occurs when blood flow to the brain is blocked or a blood vessel inside or on the surface of the brain bursts), quadriplegia (partial or complete paralysis of both the arms and legs that is usually due to injury or disease of the spinal cord in the region of the neck), and nontraumatic subarachnoid hemorrhage (bleeding in the space surrounding the brain often caused by a ruptured brain aneurysm). Resident #1 had a BIMS score of 12 which indicated his cognition was moderately impaired. The MDS further reflected Resident #1 had an indwelling catheter and had impairment on both sides of his upper and lower extremities. Record review of Resident #1's care plan revised on 07/18/25 reflected he had a Foley catheter (a thin flexible catheter used especially to drain urine from the bladder) related to a neurogenic bladder (when a person lacks bladder control due to brain, spinal, or nerve problems). The goal was that Resident #1 would remain free from catheter-related trauma and interventions included change the catheter as needed and monitor/record/report signs and symptoms of UTI (an infection of any part of the urinary system), pain, burning, blood tinged urine, cloudiness, no output, deepening of urine color, increased pulse, increased temperature, altered mental status, change in behavior, and change in eating patterns. Record review of Resident #1's monthly orders for August 2025 reflected the following: Foley Catheter: 18 Fr 10cc bulb [a type of Foley catheter where the French scale indicates the size of the catheter, and the 10 cc designation indicates the size of the balloon that holds the fluid] as needed for occlusion [blockage or closing of an opening, blood vessel, or hollow organ] or leakage as needed Record review of Resident #1's May 2025, June 2025, and July 2025 TAR (a document in healthcare that tracks the administration of treatments and medications to patients) reflected the resident's catheter had not been changed. Record review of Resident #1's progress note documented by the NP reflected the following: .08/04/25 Seen at request of staff d/t AMS [a disruption in how the brain works that causes a change in behavior]. Pt is acting paranoid, thinks his food is being contaminated. Says his penis is swollen and tender. 1. Altered mental status, unspecified altered mental status type STAT CBC [a blood test that measures the amounts and sizes of your red blood cells, hemoglobin, white blood cells, and platelets], BMP [a blood test that measures eight different substances in the blood], UA [a blood test that analyzes urine].await results .2. Swollen PenisSwitch out catheterGentle pericare [hygiene practice involving cleansing of the genital and anal area]Monitor closely. Record review of Resident #1's progress noted dated 08/04/25 documented by RN A reflected the following: This nurse received a new order for CBC, BMP, and UA in [lab system] and to change the Foley catheter, immediately this nurse deflated the balloon, patient began to bleed. This nurse notified the [physician], ordered not to remove the catheter but inflate it and leave in place and monitor patient and call if bleeding continues. Informed the incoming nurse to follow up. Further review of Resident #1's progress notes dated 08/05/25 documented by LVN B reflected the following: Critical lab results received. MD on-call notified. New order received to send patient to the hospital for evaluation. 911 called, patient transported to the ER at [hospital]. Patient in stable condition at the time of leaving the facility. Record review of Resident #1 lab results report dated 08/04/25 reflected the following: BMP Results Reference Range Potassium 6.4 mmol/l 3.5 - 5.1RUIN 103 mc/dl 6 - 25Creatinine 6.01 mc/dl 0.70 - 1.30</p> | | |