

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676271	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/05/2025
NAME OF PROVIDER OR SUPPLIER Onion Creek Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1700 Onion Creek Pkwy Austin, TX 78748	

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 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that residents are free from significant medication errors.</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 0760</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 interviews and records review the facility failed to ensure Residents were free of any significant medication error for one (Resident #1) of three Residents review for medication. The facility failed to follow physician's orders for Resident #1 when she was discharged from the hospital on [DATE]. Resident #1's order for Divalproex Sodium (Depakote) [A type of drug that is used to prevent or treat seizures or convulsions by controlling abnormal electrical. It can also be used as mood stabilizer) for this with intervention to give medications as ordered.] Oral Tablet Delayed Release 250 MG (Divalproex Sodium) Give 1 tablet BID was never carried out and Resident #1 did not receive six doses of the medication. This deficient practice placed residents at risk of not receiving therapeutic dose of medication and hospitalization. Findings included: Review of Resident #1's face sheet printed 11/05/2025 reflected a [AGE] year-old female who was admitted on [DATE] and readmitted on [DATE] with the following dx: Urinary Tract Infection (UTI- an infection of the urinary tract, which includes the kidneys, ureters, bladder, and urethra.), Unspecified Dementia, moderate with mood disturbances (Dementia is a general term for a group of conditions that cause a decline in cognitive functions, such as memory, thinking, reasoning, and problem-solving, severe enough to interfere with daily life.), Unspecified Dementia with anxiety, (a normal reaction to stress that can become an overwhelming and persistent disorder, characterized by excessive worry, fear, or dread) Review of Resident #1's quarterly MDS assessment dated [DATE] reflected a BIMS score of 99, indicating the resident was unable to complete the interview. It also reflected Resident #1 had both short-term and long-term memory problems. Section C also reflected Resident #1 had an Acute Onset Mental Status Changes that is an Is evidence of an acute change in mental status from the resident's baseline. Review of Resident 1's care plan revised 09/01/2025 reflected Resident #1 had a mood disorder and received Antiepileptic medication (A type of drug that is used to prevent or treat seizures or convulsions by controlling abnormal electrical. It can also be used as mood stabilizer) for this with intervention to give medications as ordered. Monitor/document for effectiveness and side effects. The care plan also reflected Resident #1's potential for injury due to a behavior problem related to purposely sliding/scooting from the bed and/or w/c to get onto the floor and then scooting around in room. Review of Resident #1's progress notes dated 10/25/2025 at 08:37 am written by RN B reflected: Resident [#1] observed with frequent episodes of loud vocalizations/yelling throughout the day. Resident [#1] wandering behavior noted to be continuous and non-aggressive. Multiple attempts by staff throughout the day to redirect Resident [1] by verbal reassurance, offering a quiet environment, distraction, and reorientation. Resident [#1] unable to be calmed or redirected despite intervention attempts. Resident displays clinical signs of agitation, inconsolable verbal outbursts and yelling. Review of Resident #1's progress notes dated 10/25/2025 at 10: am written by RN B reflected: Charge nurse reported to NP on call [XXXX], that Resident [#1] was screaming inconsolably despite interventions by charge nurse, medication aid, and CNA. Charge nurse tried to assist Resident [#1] with taking her scheduled medications. Resident [#1] remains unable to be consoled Resident [#1] spit it out and continued yelling. Resident [#1] denied her coke zero, offered to assist Resident [#1] to the restroom. Resident [#1] refused assistance. Resident [#1] started screaming again. notified NP of her lab results as well. NP stated that since resident is non-verbal and can't really tell you what's wrong or pinpoint any specifics to send her out to ER to be evaluated and treated. ADON, DON notified, family notified. DNR, Medication list, labs, and face sheet sent with resident with EMS. Review of Resident #1's hospital records dated 10/26/2025 reflected: Problem list - Vascular Dementia with behavioral/agitation. Continue home Depakote. Depakote level noted to be low. If noted to have worsening behavioral disturbance, can consider titrating the dose. Review of Resident #1's hospital records dated 10/27/2025 reflected: Continue home Depakote. Depakote level noted to be low- increasing Depakote to BID. Review of Resident #1's hospital discharged orders dated 10/28/2025 reflected an order for Divalproex Sodium (Depakote) Oral Tablet Delayed Release 250 MG (Divalproex Sodium) Give 1 tablet BID. It also reflected blue checks on the right side of the medication and black checks on the left side of the medication listed on the scanned document. Review of Resident #1's NP's note dated 10/28/2025 reflected Divalproex Sodium Oral Tablet Delayed Release 250 MG (Divalproex Sodium) Give 1 tablet by mouth one time a day for mood stabilizer DO NOT CRUSH active 10/09/2025. Review of Resident #1's current physician's order dated 11/05/2025 reflected an order for Divalproex Sodium Oral Tablet Delayed Release 250 MG (Divalproex Sodium) Give 1 tablet by mouth one time a day for mood stabilizer DO NOT CRUSH</p>		