

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676315	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/01/2025
NAME OF PROVIDER OR SUPPLIER The Hillcrest of North Dallas		STREET ADDRESS, CITY, STATE, ZIP CODE 18648 Hillcrest Rd Dallas, TX 75252	
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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p>Based on observation, interview and record review the facility to ensure the resident environment remained as free of accident hazards as possible for one of one maintenance office reviewed for accident hazards. The facility failed to ensure the maintenance office was locked, which contained hazardous or unsafe chemicals, when there was no one present in the office. This failure could place residents at risk for being able to ingest hazardous chemicals. Findings include: In an observation on 10/14/2025 at 10:31 AM and at 12:05 PM, the maintenance office at the end of the 300 hall was propped open. There was a spray bottle sitting on the edge of the desk. It was half full of a pink liquid labeled ZEP, Professional Sprayer, Great for cleaners, Pesticides and other liquids. On the shelf to the left of the desk was a container labeled All Purpose Leak Detector. Both chemicals had labels that read, Keep out of reach of children due to potential hazard. In an interview on 10/14/2025 at 12:16 PM with the Maintenance Director revealed he had been working at the facility for 2 years. He stated his office should be locked when there was no one in there and today it was locked earlier, he must have forgotten to lock it and shut the door. He stated the risk of leaving it open was residents could come in and grab something they should not have access to. In an interview on 10/14/2025 at 2:45 PM, with the administrator revealed she expected the maintenance office door should be closed and always locked with the risk being that someone could wander into the room. A record review of the facility's policy Maintenance-Storage Areas, dated 08/2020, revised stated, flammable liquids are never stored in areas where intense heat or open flame could ignite. Cleaning supplies and similar substances must be stored in areas separate from food storage rooms and must be stored as instructed on the labels of such products.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 676315
		If continuation sheet Page 1 of 1