STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676374	A. Building B. Wing	12/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Midlothian Healthcare Center	900 George Hopper Road Midlothian, TX 76065

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 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide and implement an infection prevention and control program. 49065 Based on observation, interview, and record review the facility failed to establish and maintain an infection prevention and control program designed to provide a safe, sanitary and comfortable environment and to help prevent the transmission of communicable diseases and infections for medical supplies stored in 1of 2 Medication storage rooms (800 Hall) and for 1 of 2 medication carts (800 Hall) reviewed for infection control /drug storage. The facility failed to ensure expired and contaminated medical supplies were removed from the medication storage room and 1 of the medication carts (located by the 800 Hall). This failure could place residents at risk for infection, ineffective treatment, and harm. Findings include: Observation on 12/03/2024 at 1:52 PM of the Medication Room near the 800 Hall revealed the following items: #1 Blood collection set (Butterfly Needle) expired on 7/6/2023. #1 Sterile Irrigation tray Medline DYND20302 - was opened and no longer sterile. #1 Pack of gauze was opened and stored non-covered in a cup under the sink. Observation on 12/03/2024 at 1:55 PM of the Medication Cart near the 800 Hall revealed the following items: #13 Syringes 1 cubic centimeter with needle; 28 Gauge expired 5/23/24. In an interview on 12/4/2024 at 1:15 PM with MA, she stated the policy on expired medications and/or opened sterile supplies was to get them out of the cart and medication room and put them in the DC (Discard) box. She stated all staff with keys to those areas, were responsible for checking the medication rooms and carts. The MA also stated the negative outcome to residents if expired or opened items were used would be to give them negative side effects. She stated it would not be as safe or correct to use those items. (continued on next page)

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:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676374	A. Building B. Wing	12/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Midlothian Healthcare Center	900 George Hopper Road Midlothian, TX 76065

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 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	In an interview on 12/4/2024 at 1:22 PM with LVN, she stated the policy on expired medications and/or opened sterile supplies was to toss it in the medication room disposal. She stated, nurses and anybody who could access the medication rooms and carts were responsible for checking the medication room and carts. The LVN stated the negative outcome to residents if expired items were used was that items would not be as effective as they should be, or they could turn bad and have a poisoning affect. The LVN stated sterile items were not sterile if they were opened and the items could give residents an infection. In an interview on 12/4/2024 at 1:35 PM with the ADM, she stated the policy on expired medications and/or opened sterile supplies was to not use and to throw them away. She stated the expired items should not be used; they should be destroyed and disposed of. The ADM stated the nurses and medication aides were responsible for checking the medication rooms and carts and after that management would be responsible for checking the medication rooms and carts. She stated the negative outcome to residents if expired or opened items were used was possible infection or they could be less effective. In an interview on 12/4/2024 at 1:45 PM with the DON, she stated the policy on expired medications and/or opened sterile supplies was they were to be discarded in the box. She stated the Assistant Director of Nursing was responsible to check behind nurses, but all nurses were responsible for checking the medication rooms and carts. The DON stated the negative outcome to residents if expired or opened items were used could be infection or death. Record review of the facility's policy, revised 7/2023, and titled, Policy/Procedure-Nursing Clinical, reflected in the Care and Treatment/Pharmacy section the following: Outdated, contaminated, or deteriorated medications and those in containers that are cracked, soiled, or without secure closures are immediately removed from stock, disposed of according to procedures .