STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676392	A. Building B. Wing	04/29/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Legend Oaks Healthcare and Rehabilitation - New Br	2468 Fm 1101 New Braunfels, TX 78130

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 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. Based on observations, interviews, and record review the facility failed to ensure all drugs and biologicals were locked in compartments under proper temperature controls and permitted only authorized personnel to have access to the keys, for 1 of 6 medication carts (the 400-hall medication cart) reviewed for security. LVN B left the 400-hall medication cart unsupervised, unattended, and unlocked for more than 9 minutes on 4/28/2026. This failure could place residents at risk for misappropriation of property and or not receiving the therapeutic effects of their medications.The findings include: During an observation and interview on 4/28/2026 at 9:10 AM, revealed the 400-hall with a medication cart positioned at the beginning of the hall. The medication cart was unattended, unsupervised, and unlocked. Continued observation revealed 2 staff walked by the unlocked medication cart, without recognizing the cart was unlocked. Residents were observed ambulating the facility, including the 400-hall. The State Surveyor intervened and alerted LVN A. LVN A stated the medication cart was the 400-hall medication cart and was assigned to LVN B. LVN A stated the cart housed residents' injectable insulin and oral medications. During an interview on 4/28/2026 at 10:15 AM, the DON stated her expectation and nurse training was for nurses to lock their medication carts when the cart was not in use. The DON stated the potential negative outcome could be uncontrolled medications. A record review of the facility's undated Medication Administration and General Guidelines policy revealed, Medications are administered as prescribed, in accordance with state regulations using good nursing principles and practices and only by persons legally authorized to do so. procedure: . when administering as needed medications at times other than medication pass, the dose may be prepared in the medication cart storage area and taken to the residence bedside, leaving the cart locked and secured.

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