

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676450	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/20/2025
NAME OF PROVIDER OR SUPPLIER Terra Bella Health and Wellness Suites		STREET ADDRESS, CITY, STATE, ZIP CODE 12262 Cityscape Ave Houston, TX 77047	

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 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. (continued on next page)

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record reviews, the facility failed to provide pharmaceutical services, including procedures that assured the accurate administration of all drugs and biologicals to meet the needs of 1 of 1 (Resident # 1) reviewed for enteral medication administration. LVN A failed to administer Resident # 1's enteral medications according to physician's order. This failure could place residents at risk for a clogged peg tube, adverse reaction, metabolic abnormalities and a decline in health. Findings included: Record review of Resident # 1's face sheet retrieved on 11/18/2025 at 09:53 a.m., revealed, Resident # 1 was an [AGE] year-old female admitted to the facility on [DATE]. She was admitted with the following medical diagnoses: Unspecified dementia(loss of cognitive functioning), gastrostomy status, (the condition or situation of a patient who has undergone a medical procedure that involves placing a tube directly into the stomach for feeding or medication administration) hypertension (high blood pressure) , anemia (when you do not have enough healthy red blood cells or red blood cells do not work as they should), hydronephrosis (swelling of one or both kidneys that makes it impossible for urine to drain properly). Record review of Resident # 1's MDS dated [DATE] revealed a BIMS score of 03 on the cognitive pattern section C0500, indicative of severe cognitive damage. Record review of Resident # 1's care plan that was last conferenced on 10/17/2025 stated: Administer medications as ordered per MD. Monitor and record effectiveness. Monitor and report any adverse side effects. Care Plan stated Resident #1 had a g-tube on the stomach. Record review of Resident # 1's MAR, retrieved on 11/20/2025 did not reveal the enteral medication should be administered together. The order read: Enteral Feeding: Flush tube with 30cc's warm water before and after tube feeding administration. An observation on 11/18/2025 at 12:16 p.m., LVN A administered, the following medications to Resident # 1 as a cocktail (combination of different medications in one cup) ; calcitriol 1 mcg/ml solution to treat hydronephrosis with renal and ureteral calculous obstruction (kidney tube blockage by kidney stones), diltiazem HCL 60 mg tablet used to treat hypertension, donepezil 10 mg tablet used to treat dementia, ferrous sulfate 220 mg used to treat anemia and lokelma 10 gram powder used to treat hyperkalemia. LVN A did not use warm water to administer the g-tube medications as specified in the MD's general order tap on 07/18/2023 06:25 a.m. During an interview with LVN B on 11/19/2025 at 10:24 a.m., she said peg tube medications are administered as follows; each medication is crushed separately and put in a separate cup and administered separately by gravity with warm water. She stated the reason for administering one medication at a time is because there might be an adverse reaction. During an interview with LVN C on 11/19/2025 at 12:15 p.m., she said peg-tube (a tube that allows you to receive medication and food through your stomach) medications are not supposed to be mixed, except if there is an order that stated they could be mixed. She stated they are supposed to be administered individually. LVN C stated, it is the responsibility of the nurse who is administering the medications to check the orders prior to medication administration. LVN C stated that the consequences of not administering each medication separately could cause stomach upset to Resident # 1, it could affect how the medication works, and it could clog the tube. She stated the facility had a bootcamp on peg tube medication administration two months ago, where they had mannequins / dummy (to demonstrate) peg medication administration. LVN C said the facility trainers did verbal explanation which was followed by demonstration. She stated the nurses did a return demonstration and were all checked off. During an interview with RN A on 11/19/2025 at 2:08 p.m., she said, I put the medications in separate cups. I crush them separately. I mix them separately and administer them one at a time via gravity. She stated she would administer the medications separately because the chemical compositions are different. RN A stated, she does not want to create any chemical reaction before the medications get into a resident's system. She said, if there was a reaction, Resident # 1 might have anaphylactic reaction (a severe life-threatening allergic reaction that can occur within minutes of exposure to a trigger like medications, food or insect stings), and abdominal issues. During an interview with LVN D on 11/19/2025 at 2:23 p.m., he acknowledged the fact that he was trained to administer peg tube medications. He said the facility's corporate nurse retrained all the nurses on all nursing skills six weeks ago. LVN D said during peg tube medication administration, he checks to make sure it's the right resident, the right medication and the right route. He said he would wash his hands and assemble all the required medications. LVN D said he would crush every medication individually in separate cups. He said, if there are five pills, he would have five separate cups. LVN D said prior to administering the medications, the nurse should stop the tube</p>		