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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455916 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 06/19/2025 |
| NAME OF PROVIDER OR SUPPLIER University Park Nursing and Rehabilitation | | STREET ADDRESS, CITY, STATE, ZIP CODE 4511 Coronado Ave Wichita Falls, TX 76310 | |

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) |
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| <p>F 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure the menu was followed for 1 of 18 residents (Resident #10) reviewed for food and nutrition services.</p> <p>The facility failed to ensure Resident #10 received items listed on his lunch meal ticket on 6/05/2025.</p> <p>This failure could place residents at risk of poor intake, chemical imbalance, and/or weight loss.</p> <p>Findings included:</p> <p>Record review of Resident #10's face sheet dated 06/19/2025 revealed [AGE] year-old male admitted on [DATE] with most recent readmission of 05/28/2025 with the following diagnoses Type 2 Diabetes, Leukemia (blood cancer that begins in bone marrow), and protein calorie malnutrition.</p> <p>Record review of Resident #10's Significant Change MDS dated [DATE] indicated the following:</p> <p>*Section C Cognitive Patterns revealed Resident #10 had a BIMS score of 11(meaning moderate cognitive impairment);</p> <p>*Section K Swallowing/Nutritional Status-revealed Resident #10 did not have weight loss in the last 6 months.</p> <p>Record review of Resident #10's lunch meal ticket dated 06/16/2025 revealed the resident was to receive the following items:</p> <p>*2 Cheese Manicotti with Marinara,</p> <p>*$\frac{1}{2}$ cu Sauteed Zucchini,</p> <p>*1 slice garlic bread,</p> <p>*$\frac{1}{2}$ c smooth yogurt, and</p> <p>*Special Notes: fruit only for dessert (per resident request).</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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Observation and interview on 06/16/2025 at 4:10 PM Resident #10 was sitting on his bed in his room. Resident #10's lunch tray was sitting on the counter, by the sink, and appeared to not have been touched. The manicotti appeared to be dry and the ends were burnt ends on the manicotti. Resident #10 stated he did not attempt to eat his lunch because his food did not look appealing, the manicotti looked dry and over cooked. Resident #10 stated he did not want dessert and had requested to get fruit to replace dessert was supposed to get yogurt with his lunch meal. Resident #10's lunch tray contained 1 manicotti without marinara sauce, zucchini, garlic bread, vanilla pudding with chocolate cookie on top. Resident #10's tray did not have a serving of fruit or a serving of yogurt. Resident #10 stated the kitchen forgets to send his fruit and yogurt often. Resident #10 stated he had snacks in his room.</p> <p>During an interview on 06/19/2025 at 10:29 AM the DM stated her expectation was Resident's meal tickets should have been followed. The DM stated the meal tickets reflected each resident's preference or dietary needs and was the menu for each resident. The DM stated the Dietary Aide, the cook, and the nurse were responsible to ensure meal tickets were followed. The DM stated she was responsible to monitor the kitchen staff. The DM stated she monitored by doing spot checks. The DM stated the affect on residents not getting what was on their meal ticket could have been weight loss because residents were not getting what they were supposed to get. The DM stated what led to failure was staff being nervous and not being thorough.</p> <p>During an interview on 06/19/2025 at 11:13 AM the RRN stated her expectation was for staff to follow policy. The RRN stated the DM and the ADMN are responsible to ensure residents were served the appropriate meals. The RRN stated the DM and the ADMN should have been making daily rounds to ensure residents received the appropriate meals. The RRN stated the effect on residents could have been residents' dissatisfaction of food and not eating the food. The RRN stated what led to failure was lack of education or staff needed to be reeducated.</p> <p>Record review of facility policy titled Resident Rights dated 2003 revealed each resident has a right to a dignified existence, self -determination, and communication with and access to persons and services inside and outside our facility.</p> | | |

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| <p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure that each resident received food that is palatable, attractive, and at a safe and appetizing temperature for 2 of 18 residents (Resident #10 and Resident #26) reviewed for nutritive value, flavor, and appearance.</p> <p>The facility failed to provide palatable food served that was palatable and attractive to Residents #10 and Resident #26 for the lunch meal on 06/16/2025.</p> <p>This failure could affect the residents by placing them at risk of poor food intake and/or dissatisfaction of the meals served.</p> <p>The findings included:</p> <p>Resident #10</p> <p>Record review of Resident #10's face sheet dated 06/19/2025 revealed [AGE] year-old male admitted on [DATE] with most recent readmission of 05/28/2025 with the following diagnoses Type 2 Diabetes, Leukemia (blood cancer that begins in bone marrow), and protein calorie malnutrition.</p> <p>Record review of Resident #10's Significant Change MDS dated [DATE] revealed: Section C Cognitive Patterns revealed Resident #10 had a BIMS score of 11(meaning moderate cognitive impairment); Section K Swallowing/Nutritional Status- revealed Resident #10 did not have weight loss in the previous 6 months.</p> <p>Observation and interview on 06/16/2025 at 4:10 PM Resident #10 was sitting on his bed in his room. Resident #10's lunch tray was sitting on the counter, by the sink, and appeared to not have been touched. Resident #10 stated he did not attempt to eat his lunch because his food did not look appealing, the manicotti looked over cooked.</p> <p>Resident #26</p> <p>Record review of Resident #26's face sheet dated 06/19/2025 revealed [AGE] year-old male admitted on [DATE] with most recent readmission of 03/27/2025 with the following diagnoses Multiple Sclerosis, heart failure and paraplegia (impairment in motor or sensory function of lower extremities).</p> <p>Record review of Resident #26's Significant Change MDS dated [DATE] revealed the following:</p> <p>*Section C Cognitive Patterns revealed Resident #26 had a BIMS score of 9(meaning moderate cognitive impairment);</p> <p>*Section K Swallowing/Nutritional Status-revealed Resident #26 did not have weight loss in the previous 6 months.</p> <p>Observation and interview on 06/17/2025 at 10:13 AM Resident #26 was lying in his bed in his room. Resident #26 stated he did not eat the manicotti served at lunch yesterday because it looked horrible, it was dry and had black burnt ends.</p> <p>(continued on next page)</p> | | |

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| <p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Observation and interview on 06/16/2025 at 1:21 PM DS B joined to taste and take the temperature of the test tray. The Manicotti appeared to be dry, no marinara on top, and ends appeared to have black crusty ends. DS B stated the plate did not appear to be appealing, the manicotti looked to dry and overcooked. DS B took the temperature of the manicotti and it was at 100 degrees. DS B stated the manicotti tasted lukewarm, that it was not hot, and appeared to be overcooked.</p> <p>During an interview on 06/19/2025 at 10:29 AM the DM stated her expectation was food should be cooked and served according to the recipe and be appealing to the residents. The DM stated the cook was responsible to ensure recipes were followed and the food was served warm and appealing. The DM stated she was responsible to monitor the kitchen staff. The DM stated she monitored by doing spot checks. The DM stated the effect on residents could have been weight loss because residents might not eat food if it did not look appetizing. The DM stated what led to failure was staff being nervous and not being thorough.</p> <p>During an interview on 06/19/2025 at 11:13 AM the RRN stated her expectation was for staff to follow policy. The RRN stated the DM and the ADMN are responsible to ensure residents were served meals that were appealing. The RRN stated the DM and the ADMN should have been making daily rounds to ensure residents received food that was appealing. The RRN stated the effect on residents could have been residents' dissatisfaction of food and not eating the food. The RRN stated what led to failure was lack of education or staff needed to be reeducated.</p> <p>Record review of facility policy titled Resident Rights dated 2003 revealed each resident has a right to a dignified existence, self -determination. ?</p> | | |

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| <p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure food was prepared in a form designed to meet individual needs for 1 of 5 residents (Resident #15) reviewed for meals.</p> <p>The facility failed to ensure that Resident #15 was served pureed vegetables that were the proper texture.</p> <p>This deficient practice could affect residents by placing them at risk for choking and weight loss.</p> <p>The findings were:</p> <p>Record review of Resident #15's face sheet dated 06/19/2025 revealed [AGE] year-old female admitted on [DATE] with the following diagnoses Dementia, pulmonary embolism and heart disease.</p> <p>Record review of Resident #15's Quarterly MDS dated [DATE] revealed the following:</p> <p>* Section C Cognitive Patterns revealed Resident #15 had a BIMS score of 0(meaning interview was not conducted due to resident was rarely/never understood);</p> <p>*Section K Swallowing/Nutritional Status revealed Resident #15 did not have weight loss in the previous 6 months and had a mechanically altered diet.</p> <p>Record review of Resident #15's Dietary Profile dated 04/14/2025 revealed Resident #15 received purred texture food and honey thickened fluids.</p> <p>During an observation on 06/16/2025 between 11:25 AM to 12:30 PM [NAME] C pureed the zucchini puree. [NAME] C did not add thickener to the vegetable. The zucchini appeared to be a thin liquid that did not hold shape. The ADMN came into the kitchen and told the DM the puree did not look correct. The DM then re-pureed food for the lunch meal. The re-pureed food by the DM appeared to be the correct pudding like consistency.</p> <p>During an observation and interview on 06/16/2025 at 12:49 PM in the dining room Resident #15 was sitting at table with CNA D. CNA D had assisted Resident #15 with eating her meal. Resident # 15 did not appear to be choking on her meal or coughing.</p> <p>During an interview on 06/16/2025 at 1:45 PM [NAME] C he stated he had his food handlers and stated DS B had trained him. [NAME] C stated he was nervous and forgot to look at recipes.</p> <p>During an interview on 06/19/2025 at 10:29 AM the DM stated her expectation was food should be cooked and served according to the recipe. The DM stated puree food should be a smooth pudding like texture and not runny. The DM stated the cook was responsible to ensure recipes were followed and pureed food was the correct texture. The DM stated she was responsible to monitor the kitchen staff. The DM stated she monitored by doing spot checks. The DM stated the effect on residents could have choked because the puree was not the correct texture. The DM stated what led to failure was [NAME] C was trained by previous Dietary Manager, and he was nervous.</p> <p>(continued on next page)</p> | | |

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| <p>F 0805</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>During an interview on 06/19/2025 at 11:13 AM the RRN stated her expectation was for staff to follow policy. The RRN stated the DM was responsible to ensure pureed food was served at the correct texture. The RRN stated the DM and the ADMN should have been making daily rounds to ensure residents received food was prepared appropriately and the correct texture. The RRN stated the effect on residents could have been residents could have choked due to food not being the correct texture. The RRN stated what led to failure was lack of education or staff needed to be reeducated.</p> <p>Record review of facility policy titled, Pureed Diet dated 2025 revealed, The pureed recipes are followed for regular diet items so that the consistency of pureed foods is that of a semi-solid rather than a semi-liquid, with minimal separation of the liquid from the solid. If placed on a fork, it may drip but it does not flow continuously through the prongs. Pureed food should hold its shape on the plate and be the consistency of applesauce or pudding to mashed potato consistency.</p> <p>Record review of puree recipe for Zucchini dated 06/16/2025 revealed, If needed, gradually add thickener . Desired thickness should be mashed potato or pudding texture.</p> | | |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review the facility failed to store, prepare, distribute and serve food in accordance with professional standards for food service safety for 1 of 1 kitchen reviewed for food and nutrition services.</p> <p>1.The facility failed to ensure that spoiled food items were disposed of properly.</p> <p>2.The facility failed to ensure foods were labeled properly.</p> <p>These failures could place residents at risk for food borne illnesses.</p> <p>Findings include:</p> <p>During an observation on 06/16/25 between 10:15 AM and 11:00 AM of kitchen revealed the following:</p> <p>Dry Storage:</p> <p>1.</p> <p>5 individual bowls of bran flake cereal with [NAME] not labeled with food description or a use by date.</p> <p>2.</p> <p>2 individual bowls of bran flake cereal with [NAME] not labeled with food description or a use by date.</p> <p>3.</p> <p>3 bags of fruit loop cereal out of the original container not labeled with food description or a use by date.</p> <p>4.</p> <p>3 bags of tortilla chips out of the original container not labeled with food description or a use by date.</p> <p>5.</p> <p>A plastic container, with a lid, contained pinto beans out of the original package labeled without a use by date.</p> <p>Refrigerator #1</p> <p>1.</p> <p>(continued on next page)</p> | | |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>20 individual glasses filled with liquid that were not labeled with a food description, open date, or a use by date.</p> <p>2.</p> <p>A metal pan that contained Jello with fruit, that was uncovered, and did not have a label with a description, or use by date.</p> <p>Refrigerator #2</p> <p>1.</p> <p>1 open container of thickened cranberry juice with manufacture details that stated use within 7 days of opening; that was not labeled with an open date.</p> <p>2.</p> <p>1 open container of thickened sweet tea with manufacture details that stated use within 7 days of opening; that was not labeled with an open date.</p> <p>3.</p> <p>1 open container of thickened dairy beverage with manufacture details that stated use within 4 days of opening; that was not labeled with an open date.</p> <p>4.</p> <p>1 open container of thickened orange juice with manufacture details that stated use within 7 days of opening; that was labeled with an open date of 06/02.</p> <p>During an interview on 06/19/2025 at 11:00 AM DS B stated he was the weekend supervisor. DS B stated he was responsible for unloading truck weekly and labeling the food items. DS B stated someone else had unloaded the truck this week because had to cover another shift. DS B stated food items should have been labeled with a food description, open date a use by dated. DS B stated if the manufacture label stated to discard after a specific time frame, then items should have been disposed of within the time frame.</p> <p>During an interview on 06/19/2025 at 10:29 AM the DM stated her expectation was food be labeled with an open and use by date. The DM stated items were stored out of original container then they needed to be labeled with a food description, open date and an use by date. The DM stated all dietary staff were responsible to ensure food was labeled correctly and disposed of when needed. The DM stated she was responsible to monitor the kitchen staff. The DM stated she monitored by doing spot checks. The DM stated the effect on residents could have been residents received food that was spoiled or past its freshness. The DM stated what led to failure was staff being nervous, and not being thorough.</p> <p>(continued on next page)</p> |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>During an interview on 06/19/2025 at 11:13 AM the RRN stated her expectation was for staff to follow policy. The RRN stated the dietary staff were responsible to ensure that food was labeled correctly and disposed of when needed. The RRN stated the DM was responsible to monitor kitchen staff by making rounds and ensuring food labeled appropriately. The RRN stated the effect on residents could have been residents receive food that was expired or loss of quality. The RRN stated what led to failure was lack of education or staff needed to be reeducated.</p> <p>Record review of facility policy titled, Food Storage and Supplies dated 2012, revealed: foods are still dated when received if they do not have an expiration date and once opened .Perishable items that are refrigerated are dated once opened and used within 7 days (if they do not have an expiration date or best by/use by date), but non-perishable items that are refrigerated once opened should be dated when opened but do not need to be discarded until their expiration date or until the quality has deteriorated . discard within time frame.</p> <p>Review of the FDA Food Code 2022 https://www.fda.gov/food/retail-food-protection/fda-food-code accessed 06/19/2025 revealed: 3-602.11 Food Labels. (A) FOOD PACKAGED in a FOOD ESTABLISHMENT, shall be labeled as specified in LAW, including 21 CFR 101 - Food labeling, and 9 CFR 317 Labeling, marking devices, and containers .(B) Label information shall include: (1) The common name of the FOOD, or absent a common name, an adequately descriptive identity statement .Time/temperature control for safety refrigerated foods must be consumed, sold or discarded by the expiration date.</p> | | |