STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675746	A. Building B. Wing	10/15/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Coronado Nursing Center	1751 N 15th St Abilene, TX 79603

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. (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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675746	A. Building B. Wing	10/15/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Coronado Nursing Center	1751 N 15th St Abilene, TX 79603

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	Based on observation, record review, and interview, the facility failed to store drugs and biologicals in locked compartments during medication storage inspection for 1 (medication Cart #1) of 1 medication cart reviewed for storage. The facility failed to store drugs and biologicals in locked and secured while unattended. This failure could place residents at risk of drug diversion.Findings included:During an observation on 10/14/2025 at 1:00 PM, medication cart #1 was observed unlocked outside of the nurse's station, prior to entering the hallway. Residents and staff were observed approximately within 10 feet of the cart out of eyesight from staff, with unlocked drawers facing outward. On top of the unsupervised cart were observed a butter knife, nail clippers, mouth wash and an unopened package of petrolatum dressing. The top drawers were observed as having glucometers, lancets, lab draw kits with included needles, hand sanitizer, zinc oxide skin protectant creams, and moisture barrier creams. The second drawer contained OTC medications such as Milk of Magnesia, cough suppressant, fish oil, gas relief tablets, B-Vitamins, Colace tablets (for constipation), Vitamin D tablets, Acid Reducing tablets, Melatonin (sleep aid), and Senna tablets (constipation). The fourth right hand drawer contained packs of AA batteries. During an interview on 10/14/2025 at 1:05 PM, the DON stated medication cart #1 was from the previous covid floor and was the isolation cart. The DON stated residents had access to knives from the kitchen and did not feel there was a risk of harm. She stated that residents could have gotten into the cart for over-the-counter meds. She stated the nurses on the floor were to monitor the cart. She stated even though it was considered an isolation cart that was no longer being used, it still needed to be locked. She stated residents could have possibly gotten the medications and taken them, which would have been harmful, causing an allergic reaction or an overdose. The DON stated the potential harm to residents was they could take the knife and harm themselves as well as the clippers, with the potential to cut themselves. She stated she did not know who placed them on top of the cart, leaving them accessible to the residents. During an interview 10/14/2025 at 5:45 PM, LVN-A stated that another Medication Aid was out of a cream, and she had taken it from medication cart #1. She stated they should have locked medication cart #1 back after taking the cream out and should have locked the cart after use. During an interview on 10/15/2025 at 11:58 PM, the ADMN stated that all medication carts should have been locked when not in use. He stated the nurses on shift should have monitored the cart and to have always been aware of the possibility of unlocked carts. He stated the responsibility ultimately was his in the end, as he was over the DON and ADON. The ADMN stated, the potential harm to residents was that residents and/or staff could have taken medications and/or over the counter drugs out of the cart. The ADMN stated it could have caused a medication diversion or misappropriation of property as well as a possible overdose or allergic reaction. The ADMN stated the failure to lock the cart was the staff being too busy to take the time to lock the medication cart when done. He stated his expectations were to have kept all medication carts locked, even an isolation cart. Record review of the facility policy Medication Labeling and Storage, dated February 2025, revealed: Policy: The facility stores all medications and biologicals in locked compartments. Only authorized personnel have access to keys. Policy Interpretation and ImplementationMedication Storage. 2. The nursing staff is responsible for maintain medication storage and preparation areas in a clean, safe, and sanitary manner.4. Compartments (including, but not limited to, drawers, cabinets, rooms, refrigerators, carts, and boxes) containing medications and biologicals are locked when not in use, and treys or carts used to transport such items are not left unattended if open or otherwise potentially available to others.