

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 45E852	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/10/2020
NAME OF PROVIDER OF SUPPLIER CROCKETT COUNTY CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 103 N AVE H OZONA, TX 76943	
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 0727 Level of harm - Potential for minimal harm Residents Affected - Many	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis. Based on interview and record review the facility failed to designate a registered nurse to serve as the Director of Nursing (DON) on a full time basis. The facility has not had a Director of Nurses (DON) since 04/19/2019. This failure could place residents at risk for not receiving necessary care and services. The Findings were: Interview on 09/09/2020 at 09:30 AM with the Administrator revealed he has not had a full time Director of Nursing (DON) since 04/19/2019, only hired a part time interim Director of Nursing (DON) on 01/01/2020. Interim DON went full time in March after the Covid19 shut down and has returned to part-time in August. Record review of nursing schedule from June 1, 2020 to September 10, 2020 revealed that there are three full time Registered Nurses, one is the MDS nurse she works Monday-Friday and the other two full time Registered Nurses rotate weekends. During interview with the Administrator on 09/10/2020 at 2:30 PM he revealed he has been running ads in the surrounding cities newspapers since January 2019 before his Director of Nurses (DON) left in April, 2019, he had a sign on bonus of ten thousand dollars. On October 23, 2019 the Administrator hired a recruitment resource agency to find a Director of Nurses, then the recruitment agency broke the contract during the Covid19 outbreak. During record review on 09/10/2020 at 3:09 PM of Time Clock Plus report dated 06/01/2019 -09/10/2020 revealed the interim DON had gone back to her full time school nurse position and only working weekends since the beginning of August.		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE (X6) DATE	

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.