STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	045190	A. Building B. Wing	04/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Nightingale at Crossett	1101 Waterwell Road Crossett, AR 71635

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 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many Note: The nursing home is disputing this citation.	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift. Based on interviews and facility document review, the facility failed to ensure the minimum staffing needs were met for the residents, during the weekends of October through December 2025, based on the Payroll Based Journal threshold and the Facility Assessment.Based on interviews and facility document review, the facility failed to ensure the minimum staffing needs were met for the residents, during the weekends of October through December of 2025, based on the Payroll Based Journal threshold and the Facility Assessment, which had the potential to affect all residents who resided in the facility The findings include: Review of the Payroll Based Journal (PBJ) Staffing Data Report, with a run date of 04/09/2026, revealed excessively low weekend staffing metrics triggered from the infraction period of October 1st– December 31st of 2025. Review of the Facility Assessment, last updated 09/2025, revealed the facility had an Average Daily Census (ADC) of 60 and Total Nursing Hours Per Resident Day (HPRD) metric of 3.745. The Facility Assessment also revealed this statement, Federal regulations will require that facilities must provide (a minimum of) 3.48 hours per resident day (HPRD) of direct care. During an interview on 04/22/2026 at 09:06 AM, Housekeeper #1 indicated that there were times when there were not enough staff to take care of the residents on the weekends, resulting in messy rooms and unmade beds. During an interview on 04/22/2026 at 11:00 AM, the Director of Nursing (DON) indicated she used a HPRD metric of 3.0 and above for staffing every day including weekends days. The DON also indicated that the staffing HRPD metric usually falls in the 3.2-3.4 range, which is above the minimum of HPRD of 3.0 During an interview on 04/22/2026 at 11:57 AM, the Administrator indicated the facility used a metric of 3.0 HPRD and above for staffing. The Administrator also indicated they were ultimately responsible for the submission of the quarterly PBJ data, but the facility used a 3rd party that prepared and submitted the data. During a joint interview on 04/22/2026 at 12:19 PM, the Administrator spoke with the 3rd party representative via phone and asked the representative what criteria would trigger the excessively low weekend staffing metric. The representative stated she would send an email with that information. Review of an email the 3rd party sent on 04/22/2026 at 12:52 PM, indicated the facility weekend (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many Note: The nursing home is disputing this citation.	HPRD was at 3.3123, which was 0.1928 short from the 3.5051 state criteria for the infraction period of October 1st – December 31st of 2025. The information sent by the 3rd party on 04/22/2026, indicating the HPRD at 3.3123 is 0.622 short from the criteria revealed in the Facility Assessment of 3.745 A review of the Arkansas Register, according to the Arkansas Administrative Code 016.25.31 Ark. Code R. 002 – Direct Care Staffing Requirements update pursuant to ACT 715 of 2021, minimum state requirement is 3.36 HPRD.