STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 045359	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/26/2026
NAME OF PROVIDER OR SUPPLIER The Blossoms at Cumberland Rehab & Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1516 Cumberland St Little Rock, AR 72202	

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 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. Based on interviews, record review, and facility policy review, it was determined that the facility failed to support resident's rights to accommodate a sexual relationship between consenting adults for two (Resident #3 and Resident #4) of five residents reviewed for resident rights. The findings include: Resident #3 Review of a quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 01/01/2026, revealed Resident #3 had a Brief Interview of Mental Status (BIMS) score of 11, which indicated the resident had moderate cognitive impairment. Resident #3 exhibited physical, verbal, and other behaviors not directed towards others one to three days in the look back period and had no issues with mood during the look back period. The MDS also revealed Resident #3 was independent for mobility. Review of Resident #3's Care Plan Report updated 03/11/2026, revealed Resident #3 had inappropriate seeking of other individual's attention. Care Plan interventions included to separate individuals and redirect. Review of Resident #3's Order Summary, revealed no orders for birth control, sexually transmitted disease testing, or consults to specialized clinics or doctors. Review of Resident #3's Progress Notes revealed no documentation of any education provided or conversations with staff regarding an incident with Resident #4 on 03/11/2026. A review of Resident #3's medical record and witness statements provided by the Administrator and Social Service revealed no assessment was completed for sexual activity before or after the incident. Resident #4 Review of an annual MDS with an ARD of 02/26/2026, revealed Resident #4 had a BIMS score of 12 which indicated the resident had moderate cognitive impairment. The MDS also revealed Resident #4 sometimes had social isolation behaviors only with no mood issues and was independent for mobility. Review of Resident #4's Care Plan Report updated 03/11/2026, revealed the resident had inappropriate seeking of other individual's attention. Care Plan interventions included to separate individuals and redirect. (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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F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Review of Resident #4's Order Summary, revealed no orders for birth control, sexually transmitted disease testing, or consults to any specialized clinics or doctors. Review of Resident #4's Progress Notes revealed no documentation of any education provided or conversations with staff regarding the incident with Resident #3 on 03/11/2026. A review of Resident #4's medical record and witness statements provided by the Administrator and Social Service revealed no assessment was completed for sexual activity before or after the incident. During an interview on 03/24/2026 at 2:57 PM, Certified Nurse Assistant (CNA) #3 stated, she found Resident #3 and Resident #4 having sex on 03/11/2026. CNA #3 stated, When I opened the door both their pants were down and they were on the floor. CNA #3 stated she notified Licensed Practical Nurse (LPN) #2 and both staff tried to separate the residents. I think me opening the door made them stop. I was told [Resident #4] and [Resident #3] had a history. I think they both wanted it to happen. It looked like they were consenting. During an interview on 03/24/2026 at 4:51 PM, LPN #2 stated after she was notified of the sexual interaction between Resident #3 and Resident #4 the residents were separated and taken to their secure units. There was no plan in place for the residents to have a consensual sexual relationship and no plan for private time for them. LPN #2 stated she was told by her bosses it had happened before. During an interview on 03/24/2026 at 4:00 PM, Resident #3 informed this surveyor they had a relationship with another resident, they did not wish to discuss it and asked the surveyor to leave. During an interview on 03/24/2026 at 4:10 PM, Resident #4 stated, Resident #3 and I got caught. Resident #4 stated that the Administrator told them we could not do that anymore. Resident #4 stated, I want to get a place, we can live together and have all the sex we want. Resident #4 stated they and Resident #3 loved each other and there was no intent to hurt Resident #3. Resident #4 stated the Administrator talked with both residents one day later. Resident #4 stated, They told us not to do it and we don't. I know how to do safe sex; you don't do it no more. During an interview on 03/26/2026 at 1:08 PM, the MDS Nurse stated she was covering as Director of Nursing (DON) during the 03/11/2026 incident. The MDS nurse stated she was with the Administrator, and they spoke with Resident #3 and Resident #4 the day after the incident. We let them know if they wanted to have sex, we would make sure they had privacy and any kind of protection they needed at that time. The MDS Nurse stated the facility did not add anything to the Care Plan because Resident #4 was actually unable do to complete the act related to an Erectile Dysfunction (ED) problem. The MDS Nurse stated, I did not document any of these conversations or interventions. During an interview on 03/26/2026 at 9:07 AM, the Administrator stated on 03/11/2026 Resident #3 and Resident #4 did not actually have sex, they wandered in the room and pulled down their pants. The Administrator stated there was intent because they were seeking each other out. The Administrator also stated Resident #3 and Resident #4 stopped and jumped up when CNA #3 walked in because they thought they were in trouble. The Administrator stated the facility did not have a policy on resident sexual relations. Review of a facility policy titled Resident Rights reviewed date of January of 2024 revealed, Federal and state laws guarantee certain basis rights to all residents of the facility including a resident right (continued on next page)

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	045359	A. Building B. Wing	03/26/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
The Blossoms at Cumberland Rehab & Nursing Center	1516 Cumberland St Little Rock, AR 72202

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F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	to be treated with kindness and respect, communication with people inside the facility, self-determination, and the right to be supported by the facility in exercising their rights.

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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 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured. Based on interviews and record review, it was determined that the facility failed to Care Plan for residents' sexual health and relationship for two (Resident #3 and Resident #4) of five residents reviewed for revised Care Plans. The findings include: Resident #3 Review of an admission Record indicated the facility admitted Resident #3 with diagnoses that included traumatic brain injury, bipolar disorder, mood disorder, and an unspecified mental disorder. Resident #3 was their own person for all legal and medical decisions. Review of a quarterly Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 01/01/2026, revealed Resident #3 had a Brief Interview of Mental Status (BIMS) score of 11 which indicated the resident had moderate cognitive impairment. Resident #3 exhibited physical, verbal, and other behaviors not directed towards others one to three days and had no issues with mood during the look back period. The MDS also revealed Resident #3 was independent for mobility. Review of Resident #3's Care Plan Report updated 03/11/2026, revealed Resident #3 had inappropriate seeking of other individual's attention. Care Plan interventions included to separate individual and redirect. Resident #4 Review of an admission Record indicated the facility admitted Resident #4 with diagnoses that included Schizophrenia, Schizoaffective disorder bipolar type, dementia, and psychosis. Resident #4 was their own person for all legal and medical decisions. Review of an annual MDS, with an ARD of 02/26/2026, revealed Resident #4 had a BIMS score of 12 which indicated the resident had moderate cognitive impairment. The MDS also revealed Resident #4 sometimes had social isolation behaviors only, had no mood issues and was independent for mobility. Review of Resident #4's Care Plan Report updated 03/11/2026, revealed Resident #4 had inappropriate seeking of other individual's attention. Care Plan interventions included to separate individual and redirect. During an interview on 03/24/2026 at 2:57 PM, Certified Nurse Assistant (CNA) #3 stated, on 03/11/2026 she found Resident #3 and Resident #4 having sex. When I opened the door both their pants were down and they were on the floor. CNA #3 notified Licensed Practical Nurse (LPN) #2 and both staff tried to separate the residents. I think me opening the door made them stop. I was told [Resident #4] and [Resident #3] had a history. I think they both wanted it to happen. It looked like they were consenting. During an interview on 03/24/2026 at 4:51 PM, LPN #2 stated after she was notified of the sexual interaction between Resident #3 and Resident #4 the residents were separated and taken to their secure units. There was no plan in place for the residents to have a consensual sexual relationship (continued on next page)

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F 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	and no plan for private time for them. LPN #2 stated, she was told by her bosses a past relationship existed between the two residents.During an interview on 03/24/2026 at 4:00 PM, Resident #3 stated they had a relationship with another resident but that it was none of my business and told the surveyor to leave. During an interview on 03/24/2026 at 4:10 PM, Resident #4 stated, Resident #3 and I got caught. Resident #4 stated that the Administrator told them, we couldn't do that anymore. I want to get a place, and we can live together and have all the sex we want. Resident #4 stated they and Resident #3 loved each other and there was no intent to hurt Resident #3. Resident #4 stated the Administrator talked with both residents one day later. They told us not to do it and we don't. I know how to do safe sex; you don't do it no more. During an interview on 03/26/2026 at 1:08 PM, the MDS Nurse stated she was covering as Director of Nursing (DON) during the 03/11/2026 incident. The MDS nurse stated she was with the Administrator, and they spoke with Resident #3 and Resident #4 the day after the incident. We let them know if they wanted to have sex, we would make sure they had privacy. And any kind of protection they needed at that time. The MDS Nurse stated she did not add anything to the Care Plan because Resident #4 was actually unable to complete the act related to an Erectile Dysfunction (ED) problem. The MDS nurse stated they did offer interventions for the ED issues. The MDS stated to Resident #4, we would talk to the doctor. She also stated, I did not document any of these conversations or interventions. This surveyor attempted to reach the Medical Director on 03/26/2026, no response to answer and no response to voicemail. During an interview on 03/26/2026 at 9:07 AM, the Administrator stated on 03/11/2026 Resident #3 and Resident #4 did not actually have sex, they wandered in the room and pulled down their pants. The Administrator stated there was intent because they were seeking each other out. The Administrator also stated Resident #3 and Resident #4 stopped and jumped up when CNA #3 walked in because they thought they were in trouble. The Administrator stated she had not provided any education for safe sex and was unsure if other staff had either. The Administrator stated she was not sure why sexual health and relationships were not on Resident #3 and Resident #4's Care Plans because by now it should have been given the time lapses since the event. The Administrator was not aware of the facility's interventions for birth control. I am sure we could get condoms or a prescription. We don't keep anything here for those circumstances. The Administrator stated the facility did not have a policy on resident sexual relations.