STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455020	A. Building B. Wing	05/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at New Braunfels	821 US Hwy 81 W New Braunfels, TX 78130

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 - Some	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. Based on observation, interview, and record review, the facility failed to ensure residents were treated with respect and dignity and to provide care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life for 1 of 1 dining area reviewed for dining.The facility failed to ensure all residents were served meals on non-disposable dishware on 5/12/2026 through 5/15/2026.This failure could result in the loss of dignity of residents and decreased quality of life. Findings included:In an observation on 5/12/2026 at 1:20 PM, lunch was being served to residents by facility staff in the dining area. Approximately 5 out of 20 trays were observed without dishware and instead held disposable, Styrofoam containers. Upon entering the kitchen, dietary staff were observed portioning food into the Styrofoam containers for residents. Disposable containers were again observed during lunch meal services on 5/13/2026-5/15/2026. In an interview with DA A on 5/12/2026 at 1:30 PM, she said the meals were being served in disposable containers because they did not have enough plates for the residents. She said approximately half of all meals had to be served in disposable containers, and the facility had been serving food in this way for a few months. In an interview with the DSM on 5/12/2026 at 1:35 PM, he said the facility did not have enough non-disposable utensils, cups, and plates for all residents. He said he submitted a request for the items through the corporate ordering system, but the order was pending approval. In an interview on 5/14/2026 at 9:40 AM, Resident #2 said he is frequently served meals in Styrofoam containers, and he dislikes it.In an interview with the Admin. on 5/15/2026 at 8:25 AM, he said he was aware of the shortage of plates, cups, and utensils. He said the DSM had submitted a request for the items through the corporate ordering system, but the order had not yet been approved. He said he had followed up a few days prior regarding the status of the order because he felt the disposable dishware was a risk to residents' dignity and dining experience. Record review of the facility policy titled Dining Atmosphere contained in the facility dining manual, dated 2023, reflected the following: .Dishware should be non-disposable, clean, eye appealing, matched, without chips of appropriate color to match the dining room decor . Flatware should be non-disposable, clean, neatly placed and in good condition . Glasses should be non-disposable, clean and free of stains or spots .

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
	455020	A. Building B. Wing	05/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at New Braunfels	821 US Hwy 81 W New Braunfels, TX 78130

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 0800 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure each resident was provided with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs for 1 of 6 residents (Resident #3) reviewed for nutrition. The facility failed to ensure Resident #3 was served a lunch tray on 5/12/2026 and 5/14/2026 that contained a double portion of protein dish and extra sandwich, as ordered by the physician.This failure could result in unintentional weight loss, nutritional deficits, and decreased quality of life. Findings included:Record review of Resident #3's Face Sheet dated 5/12/2026 reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included type 2 diabetes mellitus with hyperglycemia (when the body cannot self-regulate elevated blood sugar levels, leading to higher-than-normal blood sugar levels). Record review of Resident #3's admission MDS dated [DATE] reflected a BIMS score of 15, which indicated intact cognition. Record review of Resident #3's Order Summary Report dated 5/13/2026 reflected the following order dated 4/20/2026:Heart healthy diet Regular texture, Regular consistency, Double portions plus additional sandwich for all meals. Avoid carb heavy meals due to diabetes, no Styrofoam plates for Diabetes Mellitus Type 2.Record review of the facility document titled Diet Roster- By Resident dated 5/12/2026 reflected Resident #3 was to receive a regular diet with regular texture and thin liquids. Additional notes indicated Diabetic Diet, lg. protein, lg. protein. lg protein [sic].In an observation and interview on 5/12/2026 at 1:00 PM, Resident #3's lunch meal arrived with a paper ticket that read lg protein. The tray appeared to have a larger portion of meat in sauce than the plates of other residents at the table. The meal was not served with a sandwich. Resident #3 said his meals are frequently served with incorrect portion sizes and without a sandwich. He said he feels frustrated by the errors. He said he did not notify any staff members that his lunch was missing the sandwich because he did not want to eat, and he declined assistance with obtaining a corrected meal tray. The FNP did not respond to a telephone request for interview via a message left with the FNP's office staff on 5/14/2026 at 10:55 AM. The RD did not respond to telephone voicemail request for interview left on 5/14/2026 at 11:45 AM. In an observation on 5/14/2026 at 1:20 PM, Resident #3's lunch meal contained a single slice of meat patty that was similar in size to the trays of other residents. The paper ticket that arrived with the plate read lg protein. Resident #3 declined to participate in an interview during this observation. In an interview on 5/14/2026 at 1:20 PM, the DSM said Resident #3's lunch tray was prepared incorrectly and did not contain a large protein portion. He said the kitchen staff were trained to include 1.5 portions for residents with physicians orders for large portions. In an interview with the Admin. on 5/15/2026 at 8:25 AM, he said residents should be served trays with double portions if it is ordered by the physician. He said nursing staff should check the trays before they are served to ensure the tray is correct to promote health and nutrition for residents. Record review of the facility policy titled Altered Portions contained within the facility's dining manual dated 2023, reflected the following: .Altered portion sizes will be served upon request or at the recommendation of the RDN (or designee) and with the consent of the individual .

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455020	A. Building B. Wing	05/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at New Braunfels	821 US Hwy 81 W New Braunfels, TX 78130

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 0804 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure residents were served food that is palatable and attractive for 6 of 9 residents (Residents #1-3, and 3 anonymous residents) reviewed for nutrition. The facility failed to serve Residents #1-3 and 3 anonymous residents food that they found appetizing and attractive.These failures place residents at risk of weight loss, altered nutritional status, and diminished quality of life.Findings included:Record review of Resident #1's Face Sheet dated 5/12/2026 reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included type 2 diabetes mellitus (when the body cannot self-regulate elevated blood sugar levels).Record review of Resident #1's admission MDS dated [DATE] reflected a BIMS score of 15, which indicated intact cognition. In an interview on 5/12/2026 at 10:12 AM, Resident #1 said he disliked the food served at the facility, and the food was often served burned, with small portion sizes, or missing items. He said he frequently signs out of the facility to go to the grocery store to buy his own food because of the quality and quantity of the food at the facility. He said alternative menu choices were offered but were often limited to sandwiches, and he prefers to not eat bread due to his medical conditions. Record review of Resident #2's Face Sheet dated 5/12/2026 reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included unspecified protein-calorie malnutrition. Record review of Resident #2's annual MDS dated [DATE] reflected a BIMS score of 15, which indicated intact cognition. In an interview on 5/14/2026 at 9:40 AM, Resident #2 said the food at the facility is bad, not edible, and makes him feel sick. He said the facility limits items on the alternative menu due to shortages of ingredients, so he rarely gets to eat any food that he finds satisfying. He said the concerns about the food had been discussed at multiple resident council meetings and directly to the DSM but there had been no improvements. Record review of Resident #3's Face Sheet dated 5/12/2026 reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included type 2 diabetes mellitus with hyperglycemia (when the body cannot self-regulate elevated blood sugar levels, leading to higher-than-normal blood sugar levels). Record review of Resident #3's admission MDS dated [DATE] reflected a BIMS score of 15, which indicated intact cognition. In an interview with Resident #3 on 5/12/2026 at 11:23 AM, he said his meals at the facility taste bad and he does not always eat because he dislikes the meals. He said the trays are often served with items that he dislikes or with small portions that cause him to remain hungry after mealtimes. He said he is supposed to be receiving double portions but rarely gets correctly sized portions on his meal trays. In an observation on 5/12/2026 at 1:30 PM, the lunch meal served at the facility was observed to be a ground meat dish in a red sauce. The menu posted in the dining room listed the lunch entree of BBQ CHOPPED BEEF W/ SAUCE [sic].In a confidential interview at an undisclosed date and time. two anonymous residents said their lunch meals were disgusting and they hate the food served at the facility. They said the quality had been declining over the last six months. They said they had discussed their concerns with the DSM and other leadership at the facility, but there had been no improvements. In an observation and interview on 5/15/2026 at 10:50 AM, a lunch tray was sampled. The DSM said the facility was serving a cold lunch due to unexpected maintenance issues in the kitchen affecting the ability to wash dishes and prepare hot foods. The tray contained a sandwich with two circular slices of meat and a square slice of cheese on sliced, white sandwich style bread. The tray also contained a serving of potato chips, vanilla pudding, and a packet of ketchup. The foods were served at palatable temperature. In confidential interview at an undisclosed date and time, an anonymous resident said the quality of most meals at the facility was bad, and it made him feel unhappy.In an interview on 5/14/2026 at 9:23 AM with LVN B, he said residents frequently complained about the meals served at the facility. He said the complaints were typically about the quality of the food or incorrect trays served with foods that residents are known to dislike. The RD did not respond to a telephone request for interview via a voicemail left on 5/14/2026 (continued on next page)

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455020	A. Building B. Wing	05/15/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at New Braunfels	821 US Hwy 81 W New Braunfels, TX 78130

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 0804 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	at 11:45 AM. In an interview with MA C on 5/14/2026 at 11:57 AM, she said residents often complain about the food. She said they dislike the type of foods on the menu or the small portion sizes. In an interview with the DSM on 5/12/2026 at 1:35 PM, he said he was aware that residents were dissatisfied with the quality of the food at times. He said food at the facility was prepared using the food ordered through the corporate system, and the kitchen staff followed the recipe exactly how it written in the manual, including portion sizes.In an interview with the DON on 5/14/2026 at 1:39 PM, she said she was aware of the residents' concerns regarding the food served at the facility. She said many residents had voiced complaints to her about the food, and she felt the facility had room for improvement to ensure resident satisfaction and overall quality of life, as well at nutritional needs. In an interview with the Admin. on 5/15/2026 at 8:25 AM, he said he was aware of the residents' concerns about the food. He said he had been invited to attend a resident council meeting recently, and the lack of food quality was discussed. He said the facility was actively working on improving the food quality, and he was working with the corporate leadership to determine a feasible plan for overall improvement. He said he felt resident satisfaction with the food quality was important to their overall quality of life and nutritional status. Record review of the facility policy titled The Dining Experience contained in the facility dining manual dated 2023, reflected the following: .The dining experience will be person centered with the purpose of enhancing each individual's quality of life and being supportive of each individual's needs during dining. Individuals will be provided with nourishing, palatable, attractive meals that meet daily nutrition and/or special dietary needs and food preferences and are served at a safe and appetizing temperature .