STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455725	A. Building B. Wing	09/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Oakmont Healthcare and Rehabilitation of Humble	8450 Will Clayton Pkwy Humble, TX 77338

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to ensure the residents have the right to a safe, clean comfortable, and home like environment, including but not limited to receiving treatment and supports for daily living safely for residents, staff and the public for 3 of 4 days (09/15/2025, 09/16/2025, 09/18/2025) for 2 (Resident #2 and Resident #7) of 21 residents.The facility failed to maintain a clean and sanitary environment in resident rooms, specifically regarding the cleanliness of the floors.This failure could place risk for the residents by slipping, tripping, pest attraction, or infection control.Findings include:Record review of Resident #2's undated face sheet revealed he was a [AGE] year-old male with an initial admission date of, 03/20/2025. Resident #2 had diagnosis of, other lack of coordination, need assistance with personal care, epilepsy-unspecified not intractable without status epilepticus (a seizure within 5 minutes), gastro-esophageal reflux disease without esophagitis, and dysphagia- oropharyngeal phase. Record review of Resident #2's Quarterly MDS assessment dated [DATE], revealed a BIMS of 10. Resident #2 had no cognitive patterns that could affect his memory for long or short term when it comes to making daily decisions.In an observation of Residents #2's floor on 09/15/2025 at 10:18am revealed a large sticky red substance/spill on the right side of the resident's bed, with a plastic cup faced down over the spill. In an observation of Residents #2's floor on 09/16/2025 at 9:24am revealed a large sticky red substance/spill on the right side of the residents' bed.In an observation of Resident #2's floor on 09/17/2025 2 12:14pm revealed a plastic cup with red like juice substance on the bedside tray table, with a slight red substance on the floor, as if it were partially cleaned up. Record review of Resident #7's undated face sheet revealed she was a [AGE] year-old female with an initial admission date of, 07/18/2025. Resident #7 had diagnosis of gastrostomy status (surgical opening through the skin of the abdomen to the stomach), colostomy status (opening to the stomach to creak an opening to the colon through the belly), muscle wasting and atrophy- not elsewhere classified left lower leg, epilepsy- unspecified not intractable without status epilepticus, and dysphagia-unspecified. Record review of Resident #7's Quarterly MDS assessment dated [DATE] did not reveal the resident's BIMS. Resident #7 could not make decisions on her own and was severely impaired. In an observation of Resident #7's floor on 09/18/2025 at 9:32 am revealed a brown thick liquid substance on the right side of the bed.In an interview on 09/16/2025 with CNA P at 09:26am stated HSKP is responsible for the cleanliness of the resident's room and throughout the building. If the residents' rooms needed to be cleaned, the staff would inform housekeeping, and they are able to refresh the residents' room and floors within a substantial time. In an interview on 09/17/2025 with HSKP G at 11:56am stated HSKP use bold power floor cleaner, which is a non-bleach cleaner. Each room is cleaned on a schedule and the HSKP staff, including herself, does try to clean 4-5 rooms daily. The risk of residents' rooms and floors not being clean could attract bugs, ants, or any pest. HSKP G stated they were not informed of any floor spilling for Resident #2 but will take care of the floors on 09/17/2025.In an interview on 09/18/2025 with Resident #7 at 9:32am revealed it does take staff a little time to clean up spots on the floor. Resident #7 asked the staff to clean up from the feeding tube and has told the staff various times that they (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
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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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	know what to do to keep the room and the floors clean something is on the floor.In an interview on 09/18/2025 with Resident #2's family member at 2:50pm stated she does visit the resident daily, she might miss one day out of the week. Resident #2's family member stated three days ago (09/15/2025) she noticed red juice and a cup on the floor when she came to visit Resident #2. The same red juice stain remained on the floor on 09/16/2025 and on 09/17/2025 the red stain was gone, but the substance was still visible on the floor. In an interview on 09/18/2025 with the ADMN at 1:02pm revealed the expectation for cleanliness of the resident rooms is to continue working with the housekeeping supervisor and staff to schedule deep cleanings for rooms in need. Another expectation is during champion rounds, staff are expected to report when the rooms and floors are not clean to inform appropriate staff to maintain the expectation of a clean environment for the residents/family. At this time, the ADMN was informed of two resident rooms with stains on the floor.Record review of the facility's resident rights policy (revised on 11/28/2016) revealed in part: Safe environment - The resident has a right to a safe, clean, comfortable, and homelike environment, including but not limited to receiving treatment and support for daily living safely. The facility must be provided--A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. This includes ensuring that the residents can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk.Housekeeping and maintenance services are necessary to maintain a sanitary, orderly, and comfortable interior.