

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455802	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/07/2025
NAME OF PROVIDER OR SUPPLIER Spanish Meadows		STREET ADDRESS, CITY, STATE, ZIP CODE 440 E Ruben Torres Blvd Brownsville, TX 78520	

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)
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41761</p> <p>Based on observation, interview, and record review, the facility failed to ensure residents have a right to a safe, clean, comfortable, and homelike environment for 2 of 85 residents (Resident #1 and Resident #2) reviewed for safe, clean, and comfortable environment.</p> <p>The facility failed to recognize and repair water damage to the ceiling, in two rooms occupied by Resident #1, and Resident #2.</p> <p>This deficient practice failure could place residents at risk of a diminished quality of life due to exposure to an environment that is unpleasant, unsanitary, and unsafe.</p> <p>The findings included:</p> <p>1). Record review of Resident #1's Admission Record, dated 03/07/2025, reflected she was a [AGE] year old female, initially admitted on [DATE], with diagnoses of dementia (a general term for loss of memory, language, problem-solving and other thinking abilities that are severe enough to interfere with daily life).</p> <p>Record review of Resident #1's Quarterly MDS dated [DATE], reflected Resident #1 had a BIMS score of 12 which suggests moderate cognitive impairment. Resident #1 was always incontinent of bowel and bladder according to section H in the MDS.</p> <p>Record review of Resident #1's Care Plan, dated 02/15/2025 was up-to-date with interventions in place.</p> <p>Record review revealed on 02/21/2025 at 02:26 pm, a Progress Note was written by the Social Worker documenting Resident #1 had a room change due to inclement weather and roof renovations with the RP being notified.</p> <p>Observation on 03/03/25 at 02:55 pm Resident 1's previous room had slight bubbling to seams on ceiling by light and vent.</p> <p>(continued on next page)</p>

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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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>In an interview on 03/07/2025 at 04:11 pm, the DON stated he did not notice anything wet or damaged in Resident #1's room during his tour of the rooms on Saturday and Sunday (02/22/2025 and 02/23/2025) with the ceiling in Resident #1's original room except being able to see the seams in the drywall, but he could see the seams in the drywall in the ceilings in some of the rooms. The DON stated he had not known it was wet until Life Safety notified them of what they had seen from the attic side on 02/28/2025. DON stated they had moved Resident #1 out of that room as soon as Life Safety told them about the hole in the roof and the ceiling of Resident #1's room being wet.</p> <p>2). Record review of Resident #2's Admission Record, dated 03/07/2025, reflected she was a [AGE] year old female, initially admitted on [DATE], with diagnoses of dementia (a general term for loss of memory, language, problem-solving and other thinking abilities that are severe enough to interfere with daily life), chronic obstructive pulmonary disease (a group of lung diseases that block airflow and make it difficult to breathe), osteoporosis (brittle bones), and anxiety disorder.</p> <p>Record review of Resident #2's Quarterly MDS dated [DATE], reflected Resident #2 had a BIMS score of 12 which suggests moderate cognitive impairment.</p> <p>Record review of Resident #2's Care Plan, dated 12/28/2024, revealed was up-to-date with interventions in place.</p> <p>Record review revealed on 02/21/2025 at 02:38 pm, a Progress Note was written by the Social Worker documenting Resident #2 was moved to a new room due to due to inclement weather and roof renovations with the RP being notified.</p> <p>Observation on 02/28/25 at 01:35 pm Resident #2's previous room had a maintenance worker in the room patching the walls and ceiling.</p> <p>In an interview on 03/03/2025 at 01:15 pm, Resident #2 stated it looked as if the corner in her new room was either leaking or going to leak and when it did leak, she would file a complaint and they would come fix it.</p> <p>In an interview on 03/03/2025 at 03:19 pm, CNA B stated she only saw the barrel catching the water dripping from the ceiling in Resident #2's previous room on 02/21/2025, after Resident #2 had been moved out.</p> <p>In a telephone interview on 03/07/2025 at 01:15 pm, LVN C worked the 6 am - 10 pm shift on the South halls on 02/22/2025 and 02/23/2025. He said he thought only two of his rooms were affected by dripping from the ceiling. One of his rooms was Resident #2's room. LVN C stated he heard about the ceilings falling when he came to work (02/22/2025). He said he would do random room checks all the weekend. LVN C stated he told his CNAs to let him know if they noticed any leaking or water damage. He said when his checks were completed, he had not notice any of the other ceilings leaking.</p> <p>In an interview and observation on 03/07/2025 at 07:15 pm, Resident #2 stated she told the two guys who came around asking if she had problems with her room that there might be damage to the upper corner at the ceiling. She stated she did not know the two guys, but whoever they were, they fixed the water damage to the corner. She said she was very happy about how quickly they fixed her room. The corner of the wall/ceiling area had been patched and no damage was visible.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Record review of facility's Resident Rights Policy, Nursing Services Policy and Procedure Manual for Long-Term Care 2001 MED-PASS, Inc. (Revised February 2021), revealed,</p> <p>Policy Statement</p> <p>Employees shall treat all residents with kindness, respect, and dignity.</p> <p>Policy Interpretation and Implementation</p> <p>1. Federal and state laws guarantee certain basic rights to all residents of this facility. These rights include the resident's right to:</p> <ul style="list-style-type: none"> a. a dignified existence; b. be treated with respect, kindness, and dignity;