

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 455804	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2026
NAME OF PROVIDER OR SUPPLIER Avir at San Knoll		STREET ADDRESS, CITY, STATE, ZIP CODE 5757 N. Knoll San Antonio, TX 78240	
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 provide a comfortable and homelike environment including comfortable and safe temperature levels for 1 of 2 dining rooms (main dining hall). The facility failed to ensure the temperature in the main dining room was not above 81 degrees on 6/25/26, 7/21/26, and 7/24/26;The facility was not consistently monitoring the temperature in the dining room;The facility did not complete air conditioning repairs to ensure the unit was cooling properlyThis failure could place any residents at risk of living in an unsafe environment and result in feelings of dissatisfaction. The findings were:Record review of the facility's Test and log air temperatures, reflected All buildings are required to maintain an ambient temperature throughout resident and patient areas in a temperature range of 71 to 81 degrees Fahrenheit or at a more restrictive range required by state or local requirements. Instructions: . 2. Using a digital thermometer take random location temperatures throughout the building. 3. The time of day that the temperatures are taken should vary to ensure that the desired temperature range is achieved under a variety of conditions. Record review of the test and log air temperatures revealed the following:Due date Task Completion04/18/2026 No action recorded.06/13/2026 No action recorded06/20/2026 Marked done on-time by the Maintenance Director on 06/25/202606/27/2026 Marked done on-time by the Maintenance Director on 06/25/202607/04/2026 Marked done on-time by the Maintenance Director on 07/02/202607/11/2026 Marked done on-time by the Maintenance Director on 07/17/202607/18/2026 Marked done on-time by the Maintenance Director on 07/17/2026The facility did not provide records for the temperature logs, dated 07/17/2026.The temperature log, dated 06/25/2026 with due date 06/20/2026, reflected temperatures within the limits required by state requirements (71 to 81 degrees Fahrenheit). No times were noted on the temperature log. The dining room was 78.2 degrees Fahrenheit but there was no notation of what dining room was checked. The temperature log, dated 06/25/2026 with due date 06/27/2026, reflected a temperature of 81.2 degrees in the dining room. No times were noted on the temperature log. The temperature log, dated 07/02/2026, reflected temperatures within the limits required by state requirements (71 to 81 degrees Fahrenheit). No times were noted on the temperature log. The dining room was 73.4 degrees Fahrenheit but there was no notation of what dining room was checked. Record review of Resident #1's Face Sheet, dated 07/24/2026, reflected a [AGE] year-old female initially admitted on [DATE] and re-admitted [DATE] with diagnoses including major depressive disorder, cognitive communication deficit. Record review of Resident #1's quarterly MDS assessment, dated 06/26/2026, reflected a BIMS score of 15 out of 15, indicating intact cognition. Record review of Resident #1's care plan, undated, reflected [Resident #1] enjoys attending group activities such as Morning Coffee, Bingo. Social/Special events, revised 02/18/2026, and [Resident #1] exhibits frequent allegations or reports that are unsubstantiated, (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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 455804 If continuation sheet Page 1 of 3

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	inconsistent or delayed often during times outside of staff observation possibly seeking attention, revised 05/19/2026, with intervention staff will respond to all reports calmly, promptly, and respectfully without dismissing concerns, initiated 05/19/2026. During an interview on 07/24/26 at 10:20 AM, Resident #1 revealed she used to eat in the dining room, but she would sweat during lunch and dinner time because it was so hot. She revealed that she had to eat in her room because it was much cooler in her room. She revealed this had made her feel lonely because she liked to go to the dining room to socialize. She revealed she also went to the main dining room for bingo and she would sweat while she played bingo. She revealed she had not told staff that she stopped eating in the main dining room due to the temperature because she assumed they knew and she would hear staff (unable to name) complain about the heat. She revealed she did not know how long this had been happening but it felt like about a month or so. During an interview on an undisclosed date and time, Confidential staff member revealed in the main dining room the thermostat read 80 degrees Fahrenheit at lunch time, and above 81 degrees Fahrenheit at dinner time. They further revealed that the residents remained in the main dining room for meal service. They revealed this was reported to the ADM and the DON. They revealed the ADM said it was hot in the main dining room because the residents kept opening the door to smoke outside and staff kept breaking the thermostat by turning it down so low. They further revealed even if some residents like the temperature above 81 degrees that it was still not safe for the residents. They revealed most of the residents had psychological diagnoses and a lot of residents cannot voice for themselves. A picture provided by the confidential staff member revealed the thermostat in the dining room was 85 degrees on 07/21/2026 at 06:24 PM. During observations of the ambient temperature in the main dining room, the following was revealed on 07/24/2026:10:51 AM: the ambient temperature of the main dining room was 80.4, 80.2, and 79.7 degrees Fahrenheit (3 different locations)12:25 PM the ambient temperature in the main dining room was 80.4 and 79.7 degrees Fahrenheit (2 different locations)01:18 PM: the thermostat in the main dining room was 80 degrees Fahrenheit, but the cool setting was 72 degrees Fahrenheit03:50 PM: the thermostat in the main dining room was 82 degrees Fahrenheit, but the cool setting was 72 degrees Fahrenheit03:53 PM: the ambient temperature of the main dining room was 80.6 degrees Fahrenheit05:17 PM: the ambient temperature of the main dining room was 81.1 degrees Fahrenheit05:18 PM: the thermostat in the main dining room was 82 degrees Fahrenheit, but the cool setting was 71 degrees Fahrenheit and residents were taken to the other dining room During an interview and record review on 07/24/2026 at 05:14 PM, a service request, made by the Maintenance Director and dated 06/25/2026, revealed it was for Makeup Air units in the common area dining hall (main dining room) because the Makeup Air Units were not cooling. It further revealed the technician left and noted The work for this job is not yet complete for the following reason: Quote needed. The Maintenance Director revealed the project was not done but the higher ups were aware of the issue, and he thought it was a funding issue. He further revealed that he was in charge of checking the temperatures for the facility and if was not at the facility, he did not have any staff that checked the temperatures. During a combined interview on 07/24/2026 at 06:28 PM, the Maintenance Director revealed he could not find the temperature log for those that were due 07/11/2026 and 07/18/2026. He revealed he could not recall what times the temperatures were checked for the temperatures listed in the temperature logs provided. He revealed it was important to know the times in order to check temperatures at different times of the day. The Maintenance Director further revealed he could not explain what No actions recorded meant for the temperature logs on 06/13/2026 and 04/18/2026 and could not provide temperature logs for these days. He revealed he checked temperatures every week. He revealed it was important to know the times in order to check temperatures at different (continued on next page)		

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