STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	455895	A. Building B. Wing	05/26/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Five Points at Lake Highlands Nursing and Rehab	9009 White Rock Tr Dallas, TX 75238

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 0677 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide care and assistance to perform activities of daily living for any resident who is unable. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review the facility failed to ensure a resident who was unable to carry out activities of daily living received the necessary services to maintain nutrition, grooming and personal and oral hygiene for 1 of 4 residents (Resident#1) reviewed for ADLs. The facility failed to ensure Resident #1 had her fingernails cleaned and trimmed on 05/26/26. This failure could place residents at risk for loss of dignity, risk for infections, and a decreased quality of life. A record review of Resident #1's annual MDS assessment, dated 02/21/26, reflected a [AGE] year-old female who was admitted to the facility on [DATE] and readmitted on [DATE]. Resident #1 had diagnosis which included: hypertension (elevated blood pressure), type 2 diabetes mellitus (elevated blood sugar), non-Alzheimer's dementia (brain disorders causing cognitive decline due to factors other than Alzheimer's), and multiple sclerosis (a chronic autoimmune disease of the central nervous system in which the immune system mistakenly attacks myelin). Resident#1 BIMS score was 7/15, which indicated severe cognitive impairment. The resident was dependent with ADL's (activity of daily living). A record review of Resident #1's Comprehensive Care Plan, dated 03/04/26, reflected Focus: [Resident#1] has an ADL self-care performance deficit r/t disease process. Goal: [Resident#1] will maintain current level of function through the review date. Intervention: personal hygiene: The resident requires assistance by (X1) staff with personal hygiene and oral care. An observation and interview on 05/26/26 at 08:02 AM revealed Resident #1 was up in a wheelchair in the TV area. Both of Resident #1's hands were severely contracted with supportive devices (Contracted hands sponge pads). Resident #1 had a long fingernail approximately 0.6 centimeter on both hands, with a brown matter underneath the left-hand thumb Resident#1 was asked if she wanted her fingernails trimmed and cleaned, she replied yes. In an observation and interview on 05/26/26 at 10:52 AM revealed CNA A physically assessed Resident #1's fingernails and stated they needed trimming and the left thumb needed to be cleaned due to brown matter underneath. CNA A stated nail care for the residents was performed by CNAs on shower days and it was the responsibility of the nurses and CNAs to ensure the resident's nails kept clean and trimmed to prevent infection, and skin injury through scratching. CNA A stated the risk to Resident #1 could be infection development, skin integrity, and dignity issues. In an interview on 05/26/26 at 10:55 AM, LVN B stated the CNAs were responsible for nail care on the residents, unless they were diabetic, and the LVNs were responsible for the diabetics. She stated CNAs, and nurses were supposed to do rounds on the residents daily and checked their nails to make sure they were cleaned and trimmed, to the residents liking. She stated long dirty nails could pose a risk for infections, or skin tears. Interview and observation on 05/26/26 at 1:22 PM, the DON stated, she expected resident nail care to be provided during the shower days, and if the resident was diabetic the nurses had to trim the nails. The DON stated the resident was at risk of infection development and skin break down if she scratched herself. Record review of the facility's, undated, policy titled, Nursing Policy & Procedure Manual-Nail Care reflected, Nail management is the regular care of the toenails and fingernails to promote cleanliness, and skin integrity of tissues, to prevent infection, and injury from scratching by fingernails . It includes cleansing, trimming, smoothing, and cuticles are and is usually done during the bath.

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