

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675134	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/24/2025
NAME OF PROVIDER OR SUPPLIER  Whispering Oaks Rehab & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE  105 Hospital Dr Cuero, TX 77954	

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 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interview, and record review, the facility failed to ensure food was stored, prepared, and served under sanitary conditions for 1 of 1 kitchen reviewed for food served under sanitary conditions.</p> <p>Food from the walk-in refrigerator, with readings in the danger zone for 3 days, was served to residents.</p> <p>An Immediate Jeopardy was identified on 5/23/25 at 4:15 pm. While the Immediate Jeopardy was removed on 5/24/25 at 9:00 pm, the facility remained out of compliance at a scope of widespead and a severity level of no actual harm with potential for more that minimal harm that is not Immediate Jeopardy due to the facility's need to monitor and evaluate the effectiveness of the plan of removal and corrective actions.</p> <p>This failure could affect residents by placing them at risk for food contamination, food borne illness and a diminished quality of life.</p> <p>The findings included:</p> <p>Record review of the walk-in refrigerator logs reflected:</p> <p>5/18/25 at 5:10 AM= 55F 7:50 PM=50F</p> <p>5/19/25 at 4:30 AM= 37F 7:00 PM=50F</p> <p>5/20/25 at 4:00 AM= 39F 7:00 PM=55 F</p> <p>5/21/25 at 5: 00 AM=70F 7:00 PM= 55F</p> <p>5/22/25 at 5:30 AM= 40F 11:00 AM=41F</p> <p>Record review of facility's food purchase receipt a from local vendor dated 5/21/25 reflected \$77.50 food purchase.</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 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Record review of receipt [local grocery store name], dated 05/21/2025, reflected food items purchased included bacon and eggs. An additional 4 items listed but illegible or abbreviations not determined. Per the FSS, the food items on the receipt included 3 packages of sausage, a package of butter, 2 packages of bacon, and a package of eggs.</p> <p>Record review of facility's week 2 of the 14-day menu reflected the breakfast items from 5/18/25 to 5/20/25 included: milk, bacon, sausage, and eggs.</p> <p>During an interview on 5/22/25 at 11:30 AM, the Administrator stated: a food purchase was made on 5/21/25 pending the arrival of the food truck on 5/22/25 for food to be served on 5/22/25. The Administrator stated he did not know whether food from 5/18/25 to 5/20/25 was discarded from the refrigerator. The Administrator stated, the danger zone reading on 5/18/25 could have resulted from the refrigerator door left opened. The Administrator stated, he did not know the types of the food served on 5/18/25. The Administrator stated on 5/19/25 and 5/20/25, the coolant system was in range but out of range in the afternoon. The Administrator stated, he did not know the type of the food served on 5/19/25 and 5/20/25. The Administrator stated, on 5/21/25 when refrigerator temperature read 70 F, all food was discarded. The Administrator stated on 5/20/25, he called a kitchen contractor because of the danger zone readings and a repair visit was scheduled for 5/21/25. The Administrator stated the contractor repaired the condenser on 5/21/25 at 7:45 am. The Administrator stated the facility's procedure was to discard food when the temperature was in the danger zone. The Administrator again stated he did not know whether the food was discarded on 5/18/25 through 5/20/25 when there was a danger zone documented reading for the refrigerator.</p> <p>Observation on 5/22/25 at 2:30 PM, revealed walk-in refrigerator was working and holding a temperature below 41 F. Temperature of milk was 41 F; and un-opened bacon packet read 41 F.</p> <p>During a telephone interview on 5/22/25 at 1:00 pm, the refrigeration contractor stated: he was notified on 5/20/25 sometime in the afternoon that there were issues with the walk-in refrigerator. The contractor stated that the refrigerator's condenser was repaired on 5/21/25 around 7:45 am.</p> <p>Record review of a faxed invoice dated 5/21/25 revealed Checked cooler - found bad wire on condenser - repaired &amp; tested operation.</p> <p>During a telephone interview on 5/22/25 at 1:05 pm, the facility's MD stated, no resident had presented with GI issues for the week starting 5/18/25. The MD stated that no resident or staff complained that residents had S/S related to food borne illness for the week starting 5/18/25. The MD stated that his expectation was to discard food if the temperature in the refrigerator was out the acceptable refrigeration range. The MD stated the facility should not risk cooking food from a refrigerator that did not operate correctly in cooling temperatures because of the potential for food borne illnesses and food contamination.</p> <p>During a telephone interview on 5/22/25 at 1:20 PM, the Dietician stated she was never made aware of the refrigerator not working or being out of compliance in temperature. She stated that maintenance needed to be contacted and food discarded. The Dietician stated the purchase of food on 5/21/25 was made by the FSS. She stated no resident had complained to her about any food borne illness. She stated that it was not a requirement for her contact if the refrigerator was not working. The Dietician repeated that food needed to be discarded every day the temperature was not at an expected temperature range, and not in a danger zone temperature.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>During an interview on 5/22/25 at 1:39 PM, the DON (IP) stated: she became aware of the refrigerator not working on 5/21/25 and the refrigerator was repaired. The DON stated that if the temperature range on 5/18/25 to 5/20/25 did not meet expectation, the food needed to be discarded. The DON stated she did not know whether the food was discarded for the dates 5/18/25 to 5/20/25. The DON stated that no resident presented with S/S of food borne illnesses from 5/18/25 to the present. The DON stated that the FSS should have informed her about the temperature readings to allow her to make an assessment about IC.</p> <p>During an interview on 5/22/25 at 1:53 PM, Dietary Aide A stated she worked on 5/18/25 and remembered that food from the refrigerator was served for the dinner meal. Dietary Aide A stated that she did not work on 5/19/25 and 5/20/25.</p> <p>During an interview on 5/22/25 at 1:55 PM, [NAME] B stated she worked 5/18/25 and all food cooked came out of the freezer. [NAME] B stated she did not work on 5/19/25 and 5/20/25. Her expectation was that food be discarded if not in temperature range. [NAME] B stated the menu for 5/18/25 to 5/20/25 called for milk at breakfast; but she did not know whether milk was served to the residents.</p> <p>During an observation and interview on 5/22/25 at 2:00 PM, there was no other refrigerator in the kitchen except the walk-in refrigerator. The FSS stated: from 5/18/25 to 5/20/25, the fan worked in the walk-in refrigerator. The FSS stated the high readings from 5/18/25 to 5/20/25 at certain temperature reading intervals might have been due to the refrigerator opened for meal preparation. The FSS stated that on 5/21/25 the decision was made to shut down the walk-in refrigerator and discard the food in the refrigerator. The FSS stated, based on the meal menu for week 2, only breakfast items from the refrigerator were prepared and served to the residents from 5/18/25 to 5/20/25. The FSS stated the breakfast items were eggs, sausage, beacon, and milk. The FSS repeated that the fan worked in the refrigerator and at times the refrigerator reading was within range of regulation. The FSS stated that individual temperatures of the items in the refrigerator from 5/18/25 to 5/20/25 were not taken because, the fan worked and at times the temperature was within range. The FSS stated he discarded the food on 5/21/25 from the refrigerator and purchased food from a local vendor pending arrival of the food truck scheduled for 5/22/25 in the afternoon. The FSS repeated, no readings were taken of the food and milk stored in the refrigerator on the days (5/18/25-5/20/25) the refrigerator log indicated danger zone temperatures.</p> <p>During a telephone interview on 5/22/25 at 2:10 PM, [NAME] C stated, the days she cooked were 5/18/25 and 5/19/25 in the afternoon and all food products came from the freezer. [NAME] C stated that the fan worked in the refrigerator from 5/18/25 to 5/20/25. [NAME] C stated that milk from the refrigerator was on the breakfast menu from 5/18/25 to 5/20/25; but she did not know whether milk was served to the residents. [NAME] C stated that food needed to be discarded if the refrigerator did not meet expected temperature readings. [NAME] C stated that she assumed food from the refrigerator from 5/18/25 to 5/20/25 was okay to consume.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>During an observation and interview on 5/23/25 at 3:00 PM, observation reflected the refrigerator temperature was 39 F. Items in the refrigerator included: eggs, bacon, butter, one roll of frozen beef, frozen fruit boxes, juices, deserts, and tortillas in packages. The FSS stated contracted staffing for the kitchen was: 1 FSS, 3 Cooks, and 3 Dietary Aides. The FSS stated when the refrigerator reflected danger zone readings all food was thawed under running water in the sink. The FSS stated that food items were cooked from the refrigerator from 5/18/25 to 5/20/25. The FSS stated that no training on danger zone temperatures and corrective actions started after the surveyor's entrance on 5/22/25.</p> <p>Record review of the facility's 802 reflected the vulnerable residents to foodborne illnesses included 1 resident on hospice, 3 residents with diagnoses of infections, and 1 resident with dehydration.</p> <p>The facility provided a list of 9 residents with compromised immune systems due to diagnoses.</p> <p>Record review of the 7 dietary staff employee files (FSS, Dietary Aide A, [NAME] B, [NAME] C, [NAME] D, Dietary Aide E and [NAME] F) reflected all had food service certifications that were current.</p> <p>Record review of facility document Schedule for week- 05/11/2025 to 05/17/2025 [sic], dated 05/18/2025 to 05/24/2025, reflected:</p> <ul style="list-style-type: none"> <li>- [NAME] F worked as a cook on 5/19/25 to 5/22/25 for shifts scheduled from 4:00 AM to 12:00 PM,</li> <li>- [NAME] C worked as a cook on 5/18/25 for a shift scheduled from 5:00 AM to 1:00 PM and on 5/19/25 and 5/20/25 for a shift scheduled from 12:30 PM to 7:30 PM,</li> <li>- [NAME] D worked as a diet aide on 5/19/25 to 5/21/25 for shifts scheduled from 6:00 AM to 1:30 PM,</li> <li>- [NAME] B worked as a cook on 5/18/25, 5/21/25, and 05/22/25 for shifts scheduled from 12:30 PM to 7:30 PM,</li> <li>- Diet Aide A worked as a diet aide on 5/18/25 and 5/22/25 for shifts scheduled from 6:00 AM to 1:30 PM and on 5/19/25 for a shift scheduled from 12:30 PM to 7:30 PM, and</li> <li>- Diet Aide E worked as diet aide on 5/18/25 and 5/20/25 to 5/22/25 for shifts scheduled from 12:30 PM to 7:30 PM.</li> </ul> <p>Record review of Contractor R Job Invoice dated 5/21/25, reflected the job location as Walk in Cooler and description of work as checked cooler [sic] found bad wire on condenser [sic] repaired and tested operation.</p> <p>Record review of Kitchen's in-service entitled, Refrigeration Temp Control and Corrective Actions, dated 5/22/25 reflected 3 kitchen staff had taken the training provided by the FSS.</p> <p>Record review of Kitchen staff list, dated 5/23/25, reflected contracted staff assigned to the kitchen included: 1 FSS, 3 cooks, and 3 dietary aides.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>During interview on 5/23/25 at 6:30 PM, [NAME] B stated the highlight of the in-service was to throw away food in the refrigerator that read danger zone temperatures.</p> <p>During an interview on 5/23/25 at 6:35 PM, Dietary Aide A stated she learned from the in-service that food needed to be thrown away in refrigerators that registered danger zone readings.</p> <p>During an interview on 5/23/25 at 6:40 PM, the FSS stated the message he wanted to give dietary staff was to monitor danger zone temperatures, know about food borne illnesses, and throw away food that was in a refrigerator with danger zone readings for an extended period, and to take the temperature of foods and liquids in the refrigerator.</p> <p>During telephone interview on 5/23/25 at 6:45 PM, [NAME] D stated the training highlight was to know danger zone temperatures, throw away foods in the danger zone, and to notify the FSS.</p> <p>Record review of facility's Foodborne Illness policy revised 11/2017 read Foodborne illness is a disease caused by the consumption of a contaminated food .Controlling temperature is the most critical way to assure food safety .The temperature danger zone is between 41 F to 135 F.</p> <p>The Administrator and the DON were notified of the Immediate Jeopardy on 5/23/25 at 4:15 PM and were provided with the Immediate Jeopardy Template. The facility was asked to provide a Plan of Removal to address the Immediate Jeopardy.</p> <p>The Plan of Removal was accepted on 5/23/24 at 9:18 pm and reflected the following:</p> <p>[Facility]</p> <p>5/23/25 @ 4:50pm Food &amp; Nutrition F812 - Called related to delay in response to temperatures out of parameters and failure to dispose of potentially spoiled food[.]</p> <p>I. Resident Specific</p> <p>On 5/20/25 at 3:30pm. All immunocompromised residents immediately assessed by DON and ADON for any signs and symptoms of GI concerns or change of condition. No residents identified with symptoms[.]</p> <p>On 5/20/25 at 3:50pm All residents immediately assessed by [NAME] [sic] &amp; ADON for any signs and symptoms of GI concerns or change of condition. No residents identified with symptoms[.]</p> <p>5/22/25 at 11:45am All immunocompromised residents were reassessed by charge nurse when it was identified that there was potential that improperly store food was used and served. No residents identified with symptoms.</p> <p>On 5/22/25 at 12:15pm all other residents were assed [sic] by charge nurse when identified that there was potential that improperly store food was used and served. No residents identified with symptoms.</p> <p>On 5/22/25 @ 11:45am DON documented on the 24-hour report to continue to monitor all residents for GI symptoms and change of condition and report any residents with symptoms to the medical director.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>On 5/22/25 at 1:06pm Medical Director notified of the delay in Administrator notification of [out-of-range] temperatures without removing potentially spoiled food, Medical Director stated resident should show signs &amp; symptoms within 24 hours of being given food stored at improper temperatures.</p> <p>On 5/23/25 all monitoring results were documented in the resident[s] chart. No residents displayed any symptoms of GI concerns or change of conditions from potential exposure to improperly stored food.</p> <p>II. System Changes</p> <p>On 5/20/25 @ 7:45am last time food was served from refrigerator which means 24 hours would end on 5/21/25 @ 7:45am</p> <p>On 5/20/25 @ 3:30pm Administrator was notified of improper temperature on refrigerator.</p> <p>On 5/20/25 @ 3:45pm Administrator called repairman to fix refrigerator.</p> <p>On 5/21/25 @ 6am all food was removed from the refrigerator and thrown out</p> <p>On 5/21/25 @ 7:45am the refrigerator motor wire was repaired</p> <p>On 5/22/25 @ 6am Fresh food purchased and placed in the refrigerator</p> <p>On 5/22/25 Administrator will start making rounds in the kitchen 3x weekly during environmental rounds to validate temperatures match documentation and within correct parameters</p> <p>III. Education</p> <p>On 5/22/25 @ 11am All kitchen staff on duty were educated by Dietary manager on recording all required temperatures daily and reporting any that are out of range to both Dietary manager and Administrator immediately as well as all steps that should be taken. This education will continue with all staff as they return to work prior to start of shift until 100% of staff are completed. And all new employee's and contract dietary staff will be educated prior to their 1st shift.</p> <p>On 5/22/25 @ 2pm Dietary manager was educated on his responsibility of notifying the Dietician.</p> <p>On 5/22/25 @ 11:45am Kitchen staff not reporting out of range temperatures when identified was counseled and education of potential risk to residents for not reporting.</p> <p>In March 2025 Three of Dietary staff just completed food handler certification.</p> <p>IV. Monitoring</p> <p>Administrator/Designee will review temperature of the refrigerators daily x1 week validating they match the recorded temperature, then 3x weekly thereafter.</p> <p>Dietary/Designee manager will monitor daily that all temperatures are documented as part of his start up process.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>All monitoring will be reviewed in stand up meeting and monthly in QAPI intervention will be changed or added as needed.</p> <p>Verification of Plan of Removal:</p> <p>During an observation of facility walk-in refrigerator and freezer on 5/24/25 at 4:43 PM, the refrigerator and freezer were noted to be within acceptable food storage temperature ranges, 40 degrees and 5 degrees. The food was observed to be dated and stored properly. The food in the refrigerator was noted to not have foods dated earlier than 5/22/25.</p> <p>Record review of Resident #1's admission Record, dated 5/24/25, reflected an [AGE] year-old female. She was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>Record review of Resident #1's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of cerebral infarction (a disruption in the brain's blood flow), with other diagnoses of peripheral vascular disease (a circulatory condition in which narrowed blood vessels reduce blood flow to the limbs), and heart disease (a range of conditions that affect the heart).</p> <p>Record review of Resident #1's Quarterly MDS Assessment, dated 4/15/25 and signed as completed on 4/17/25, reflected Resident #1 had a BIMS score of 13 indicating she was cognitively intact. Under Nutritional Approaches, Resident #1 was noted to have not received parenteral/IV feeding (received nutrients administered directly into a vein, bypassing the digestive system), used a feeding tube, received a mechanically altered diet, or received a therapeutic diet while a resident.</p> <p>Record review of Resident #1's Progress Note, dated 05/23/2025 at 06:10 p.m., reflected Resident was assessed immediately when temp were [sic] reported out of range and have been monitor [sic] for the 24 hours recommended by MD has had no signs and symptoms of food borne illness.</p> <p>During an interview on 5/24/25 at 4:08 PM, Resident #1 stated she ate the food provided by the facility. She revealed the food had been okay over the last week, she had a history of upset stomach occasionally, but the food had been okay, and her stomach had not been upset.</p> <p>Record review of Resident #2's admission Record, dated 5/24/25, reflected a [AGE] year-old female. She was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>Record review of Resident #2's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of pneumonia (a lung infection), with other diagnoses of transient cerebral ischemic attack (a brief, stroke-like attack that resolves itself), and dementia (a general term for impaired ability to remember, think, or make decisions).</p> <p>Record review of Resident #2's Quarterly MDS Assessment, dated 4/19/25 and signed as completed on 4/25/25, reflected Resident #2 had a BIMS score of 3 indicating she was moderately cognitively impaired. Under Nutritional Approaches, Resident #2 was noted to have received a therapeutic diet while a resident.</p> <p>Record review of Resident #2's Progress Note, dated 05/23/2025 at 06:02 p.m., reflected Res was assessed immediately when temp were [sic] reported out of range and has been monitor [sic] for the 24 hours recommended by MD has Res. has had no S/S of food borne illness.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>During an interview on 5/24/25 at 4:12 PM, Resident #2 stated she ate the food provided by the facility and the food had been okay over the last week. She revealed she had one loose bowel movement during the last week, which she did not report to the nursing staff, but that was normal for her, and it had been resolving since then.</p> <p>Record review of Resident #3's admission Record, dated 5/24/25, reflected an [AGE] year-old female. She was admitted on [DATE].</p> <p>Record review of Resident #3's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of dementia, with other diagnoses of polyuria (excessive or abnormally large production of urine), and hypo-osmolality (low levels of electrolytes, proteins, and nutrients in the blood) and hyponatremia (low levels of sodium in the blood).</p> <p>Record review of Resident #3's Annual MDS Assessment, dated 5/4/25 and signed as completed on 5/15/25, reflected Resident #3 had a BIMS score of 15 indicating she was cognitively intact. Under Nutritional Approaches, Resident #3 was noted to have received a therapeutic diet while a resident.</p> <p>Record review of Resident #3's Progress Note, dated 05/23/2025 at 06:02 p.m., reflected [Resident's name] was assessed immediately when temp was reported out of range and have been monitor [sic] for the 24 hours recommended by md and patient has had no signs or symptoms of food borne illness.</p> <p>During an interview on 5/24/25 at 4:16 PM, Resident #3 stated she ate the food provided by the facility and the food had been good this last week, but it depended on who had cooked that meal. She revealed she had colitis (inflammation of the colon which can lead to symptoms such as pain, diarrhea, and sometimes blood in the stool), which limited the foods she tolerated; however, she stated she took medicine for the colitis and had not experienced diarrhea.</p> <p>Record review of Resident #4's admission Record, dated 5/24/25, reflected a [AGE] year-old male. He was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>Record review of Resident #4's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of cerebrovascular disease (a group of conditions that affect the blood flow and blood vessels in the brain), with other diagnoses of basal cell carcinoma of skin (type of skin cancer) of nose, and peripheral vascular disease.</p> <p>Record review of Resident #4's Quarterly MDS Assessment, dated 2/23/25 and signed as completed on 2/24/25, reflected Resident #4 had a BIMS score of 15 indicating he was cognitively intact. Under Nutritional Approaches, Resident #4 was noted to have not received parenteral/IV feeding (received nutrients administered directly into a vein, bypassing the digestive system), used a feeding tube, received a mechanically altered diet, or received a therapeutic diet while a resident.</p> <p>Record review of Resident #4's Progress Note, dated 05/23/2025 at 05:00 p.m., reflected Res. was assessed immediately when temp. were [sic] reported out of range and has been monitor [sic] for 24 hours recommended by MD. Res has had no S/S of food borne illness.</p> <p>During an interview on 5/24/25 at 4:20 PM, Resident #4 stated he ate food from the facility and sometimes it tasted good. He revealed he had not had an upset stomach in the last week.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Record review of Resident #5's admission Record, dated 5/24/25, reflected a [AGE] year-old male. He was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>Record review of Resident #5's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of dementia, with other diagnoses of end stage renal disease (condition where the kidneys reach an advanced state of loss of function), and hyperlipidemia (high fat levels in the blood).</p> <p>Record review of Resident #5's Quarterly MDS Assessment, dated 3/4/25 and signed as completed on 3/7/25, reflected Resident #5 had a BIMS score of 9 indicating he was mildly cognitively impaired. Under Nutritional Approaches, Resident #5 was noted to have received a therapeutic diet while a resident.</p> <p>Record review of Resident #5's Progress Note, dated 05/23/2025 at 05:28 p.m., reflected Resident was assessed immediately when temp were [sic] reported out of range and have been monitor [sic] for the 24 hours recommended by MD [sic] has had no signs and symptoms of food borne illness.</p> <p>During an interview on 5/24/25 at 4:24 PM, Resident #5 stated he ate the food provided by the facility and it had been okay over the last week. He stated he had not experienced an upset stomach over the last week.</p> <p>Record review of Resident #6's admission Record, dated 5/24/25, reflected a [AGE] year-old male. He was admitted on [DATE].</p> <p>Record review of Resident #6's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of fracture (break) of unspecified part of neck of right femur (a part of the thigh bone that connects the upper round part of the bone to the rest of the straight thigh bone), with other diagnoses of alcohol dependence with alcohol-induced persisting dementia, and alcohol dependence with withdrawal.</p> <p>Record review of Resident #6's EMR reflected Resident #6 did not have a completed comprehensive MDS Assessment on 5/24/25.</p> <p>Record review of Resident #6's BIMS assessment, dated 5/19/25, reflected Resident #6 had a BIMS score of 13 indicating he was cognitively intact.</p> <p>Record review of Resident #6's Progress Note, dated 05/23/2025 at 05:37 p.m., reflected Res. was assessed immediately when temp were [sic] reported out of range and have been monitor [sic] for the 24 hours recommended by MD [sic] and Res. has had no S/S of food borne illness.</p> <p>During an interview on 5/24/25 at 4:25 PM, Resident #6 stated he had been eating the food provided by the facility. He revealed he did not like the type or section of food provided, and due to his dislike of the food, he did not eat very much. He stated he had not experienced any upset stomach over the last week.</p> <p>Record review of Resident #7's admission Record, dated 5/24/25, reflected a [AGE] year-old male. He was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>(continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675134	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/24/2025
NAME OF PROVIDER OR SUPPLIER  Whispering Oaks Rehab & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE  105 Hospital Dr Cuero, TX 77954	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Record review of Resident #7's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of acute and chronic respiratory failure with hypoxia (sudden onset and long-lasting condition in which the lungs cannot adequately oxygenate the blood leading to low oxygen levels), with other diagnoses of chronic systolic (congestive) heart failure (long-lasting condition resulting from the gradual decrease in the heart's ability to pump blood out to the rest of the body), and erythema intertrigo (red inflamed rash).</p> <p>Record review of Resident #7's Significant Change MDS Assessment, dated 5/7/25 and signed as completed on 5/15/25, reflected Resident #7 had a BIMS score of 13 indicating he was cognitively intact. Under Nutritional Approaches, Resident #7 was noted to have received a therapeutic diet while a resident.</p> <p>Record review of Resident #7's Progress Note, dated 05/23/2025 at 05:34 p.m., reflected Res. was assessed immediately when temp was reported out of range and has been monitor [sic] for the 24 hours recommended by MD [sic] and has had no S/S of food borne illness.</p> <p>During an interview on 5/24/25 at 4:29 PM, Resident #7 revealed he ate the food provided by the facility and the food was improving in consistency for quality. He revealed he had not had any stomach upset in the last week.</p> <p>Record review of Resident #8's admission Record, dated 5/24/25, reflected a [AGE] year-old female. She was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>Record review of Resident #8's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of encounter for surgical aftercare following surgery on the digestive system, with other diagnoses of periprosthetic fracture around internal prosthetic right knee joint (a broken bone around an artificial right knee joint), and dementia.</p> <p>Record review of Resident #8's Quarterly MDS Assessment, dated 5/2/25 and signed as completed on 5/7/25, reflected Resident #8 had a BIMS score of 15 indicating she was cognitively intact. Under Nutritional Approaches, Resident #8 was noted to have not received parenteral/IV feeding (received nutrients administered directly into a vein, bypassing the digestive system), used a feeding tube, received a mechanically altered diet, or received a therapeutic diet while a resident.</p> <p>Record review of Resident #8's Progress Note, dated 05/23/2025 at 05:58 p.m., reflected Res. was assessed immediately when temp were [sic] reported out of range and has been monitor [sic] for the 24 hours recommended by MD [sic] and Res. has had no S/S of food borne illness.</p> <p>During an interview on 5/24/25 at 4:38 PM, Resident #8 stated she ate the food provided by the facility and the food had been normal over the last week. She revealed she had not experienced an upset stomach in the last week.</p> <p>Record review of Resident #9's admission Record, dated 5/24/25, reflected a [AGE] year-old female. She was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>(continued on next page)</p>

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675134	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/24/2025
NAME OF PROVIDER OR SUPPLIER  Whispering Oaks Rehab & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE  105 Hospital Dr Cuero, TX 77954	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Record review of Resident #9's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of hemiplegia (paralysis of one side of the body) and hemiparesis (muscle weakness of one side of the body) following cerebral infarction affecting left non-dominant side, with other diagnoses of chronic kidney disease stage 4 (severe, a condition where the kidneys lose their ability to filter blood and remove wastes), and malignant neoplasm (cancerous tumor) of unspecified site of right female breast.</p> <p>Record review of Resident #9's Quarterly MDS Assessment, dated 5/6/25 and signed as completed on 5/12/25, reflected Resident #9 had a BIMS score of 15 indicating she was cognitively intact. Under Nutritional Approaches, Resident #9 was noted to have received a therapeutic diet while a resident.</p> <p>Record review of Resident #9's Progress Note, dated 05/23/2025 at 05:10 p.m., reflected Resident was assessed immediately when temp were [sic] reported out of range and have [sic] been monitor [sic] for the 24 hours recommended by MD [sic] and patient has had no signs and symptoms of food borne illness.</p> <p>During an interview on 5/24/25 at 4:46 PM, Resident #9 revealed she did eat the food provided by the facility. She stated the food was normal over the last week and she had not had any problems with her stomach.</p> <p>Record review of Resident #10's admission Record, dated 5/24/25, reflected a [AGE] year-old male. He was admitted on [DATE].</p> <p>Record review of Resident #10's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of dementia, with other diagnoses of chronic kidney disease stage 3A, and viral hepatitis C (a viral infection that causes liver inflammation) without hepatic coma (a coma induced by severe liver disease).</p> <p>Record review of Resident #10's Quarterly MDS Assessment, dated 5/16/25 and signed as completed on 5/21/25, reflected Resident #10 had a BIMS score of 13 indicating he was cognitively intact. Under Nutritional Approaches, Resident #10 was noted to have not received parenteral/IV feeding (received nutrients administered directly into a vein, bypassing the digestive system), used a feeding tube, received a mechanically altered diet, or received a therapeutic diet while a resident.</p> <p>Record review of Resident #10's Progress Note, dated 05/23/2025 at 05:24 p.m., reflected Resident was assessed immediately when temp were [sic] reported out of range and have [sic] been monitor [sic] for the 24 hours recommended by MD [sic] and patient has had no signs and symptoms of food borne illness.</p> <p>During an interview on 5/24/25 at 4:44 PM, Resident #10 revealed he ate the food provided by the facility and thought that it had been the same over the last week. He stated he had not experienced an upset stomach over the last week.</p> <p>Record review of Resident #11's admission Record, dated 5/24/25, reflected a [AGE] year-old female. She was initially admitted on [DATE] and re-admitted on [DATE].</p> <p>(continued on next page)</p>		

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NAME OF PROVIDER OR SUPPLIER  Whispering Oaks Rehab & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE  105 Hospital Dr Cuero, TX 77954	
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<p>F 0812</p> <p>Level of Harm - Immediate jeopardy to resident health or safety</p> <p>Residents Affected - Many</p>	<p>Record review of Resident #11's Diagnosis Report, dated 5/24/25, reflected a primary diagnosis of speech and language deficits (difficulties in communication that can affect both the ability to produce sounds and to understand and use language) following unspecified cerebrovascular disease, with other diagnoses of malignant neoplasm of bladder, and dementia.</p> <p>Record review of Resident #11's Quarterly MDS Assessment, dated 4/28/25 and signed as completed on 4/30/25, reflected Resident #11 had a BIMS [TRUNCATED]</p>		