STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675428	A. Building B. Wing	06/18/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pleasanton South Nursing and Rehabilitation	905 West Oaklawn Rd Pleasanton, TX 78064

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 0583 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Keep residents' personal and medical records private and confidential. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, and record reviews, the facility failed to protect the confidentiality of personal and medical records for one (1) of three (3) staff (MA A) observed for confidentiality of records. The facility failed to ensure MA A locked her computer on the medication cart, which exposed Resident #1's electronic medication administration record, so the resident's information could be seen and/or accessed by someone walking by on 06/18/2026 at 12:36 p.m. This failure could place residents at risk of having medical information exposed to others and cause residents to feel uncomfortable and disrespected.The findings included: Record review of Resident #1's admission Record, dated 06/18/2026, reflected a [AGE] year-old female. She was admitted to the facility on [DATE]. Record review of Resident #1's Diagnosis Report, dated 06/18/2026, reflected diagnoses included multiple fractures (breaks) of ribs on the right side, hypertension (condition of high pressure in the vessels that carry blood from the heart to the rest of the body), acute sinusitis (inflammation of the sinuses), and hypothyroidism (when the thyroid does not produce enough hormones). Record review of Resident #1's Quarterly MDS Assessment, dated 06/09/2026, reflected the resident had a BIMS score of 14, which indicated she was cognitively intact. She had hypertension, fractures (other than hip), and had received both scheduled and as needed pain medications in the last 5 days. She had occasional pain in the last five (5) days. She was taking an opioid (used to control pain). Record review of Resident #1's Order Summary Report, dated 06/18/2026, reflected the following order summaries with order status, order date, start date, and end date if available: - amlodipine besylate oral tablet 5 MG (Amlodipine Besylate) Give 1 tablet by mouth one time a day for HTN Hold if SBP < 110, DBP <60, or HR <60, order noted as active, order date 10/17/2024, start date 10/18/20264, and an end date was not entered. - Levocetirizine Dihydrochloride Oral Tablet 5 MG (Levocetirizine Dihydrochloride) Give 1 tablet by mouth as needed for allergies, order noted as active, order and start date 04/24/2025, and an end date was not entered.- Levothyroxine Sodium Oral Tablet 75 MCG (Levothyroxine Sodium) Give 1 tablet by mouth one time a day for thyroid, order noted as active, order date 10/17/2024, start date 10/18/2024, and an end date was not entered.- Tramadol HCl Tablet 50 MG Give 1 tablet by mouth every 12 hours as needed for Pain, order noted as active, order and start date 11/27/2024, and an end date was not entered. During an observation on 06/18/2026 at 12:36 p.m., a medication cart, parked next to the centrally located nurses' station, revealed a computer screen on a medication cart, with the computer facing away from the nurses' station and down a resident hallway, was unlocked and unsupervised with Resident #1's medication orders and administration schedule visible and accessible. There were no residents or visitors in the immediate area. At 12:38 p.m., MA A was observed to approach the medication cart and computer from a resident hall and immediately locked the computer screen. During an interview on 06/18/2026 at 12:38 p.m., MA A stated she did notice she left her computer open. She stated she got distracted. She stated the facility did provide training on the expectation for staff to secure the computers. She stated leaving the computer screen open was a HIPAA violation, exposing patient information. During an interview on 06/18/2026 at 04:33 p.m., Resident #1 stated she would not care if anyone saw what type of medications she took. She stated she only regularly took thyroid, blood pressure, and allergy (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0583 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	medications with the occasional tramadol (an opioid) when needed. She stated it did not bother her if anyone knew. During an interview on 06/18/2026 at 06:41 p.m., the DON stated her expectation for staff was to lock the electronic medical record by putting on a lock screen or closing the computer when walking away. She stated the impact of a computer screen being left open and visible was that it was a HIPAA violation and residents with an adequate cognitive status could see the screen and know about another resident's medications and possibly their health conditions. During an interview on 06/18/2026 at 07:09 p.m., the ADMIN stated the impact of an open and unattended computer was that there was the potential that a resident's private information could be exposed to people that should not have access to it. Record review of the facility's policy titled, Electronic Security, dated copyright 2026, revealed, Policy: It is the policy of this company to keep all intellectual property (electronic data) and its electronic resources (printers, networks, servers, laptops, desktops, storage, etc .) secure from any unauthorized use.Policy Explanation and Compliance Guidelines:1. Access to all resources is to be restrictive in nature and only authorized users may access these resources. Record review of the facility's policy titled, Resident Rights, dated copyright 2026, revealed, 7. Privacy and confidentiality. The resident has a right to personal privacy and confidentiality of his or her personal and medical records. b. The resident has a right to secure and confidential personal and medical records.

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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 0732 Level of Harm - Potential for minimal harm Residents Affected - Many	Post nurse staffing information every day. Based on observation and interview, the facility failed to post on a daily basis information that included the facility name, current date, total number and actual hours worked by registered nurses, licensed practical or licensed vocational nurses, certified nurse aides directly responsible for resident care per shift and the resident census for two (2) of two (2) days (06/17/2026 and 06/18/2026) reviewed for posting of required information. 1. The facility failed to post the correct date on the required current nurse staffing and census information on 06/17/2026. 2. The facility failed to post the required current nurse staffing and census information at the beginning of each shift on 06/18/2026. These failures could place all residents, their families, and facility visitors at risk of not having access to information regarding staffing data and the facility census. The findings included: During an observation on 06/18/2026 at 12:05 p.m., a document labeled [facility name] Staffing Report, dated 06/16/2026, was posted on a wall of the front lobby. The document included the following information: census and the scheduled number and hours worked of registered nurses, licensed practical nurses, medication technicians, certified nurse aides, and nurse aides for the eight (8) noted nursing department 24-hour coverage shift times: 06:00 a.m.- 02:00 p.m., 02:00 p.m.- 06:00 p.m., 06:00 a.m.- 06:00 p.m., 07:00 a.m.- 03:00 p.m., 02:00 p.m.- 10:00 p.m., 06:00 p.m.- 10:00 p.m., 06:00 p.m.- 06:00 a.m., and 10:00 p.m.- 06:00 a.m. During an interview on 06/18/2026 at 06:41 p.m., the DON stated the HR was normally responsible for posting the daily census and nurse staffing document. She stated she checked the posting after lunch and it was dated for today, 06/18/2026, so it was possible the HR got caught up. She stated the posting was to let residents' families know what the daily census was and who was on the floor working. She stated it let facility visitors know what to expect on how many nursing staff were working on the floor. During an interview on 06/18/2026 at 07:00 p.m., the HR stated she had an appointment this morning, 06/18/2026, and when she returned at 12:30 p.m., she posted the daily census and nurse staffing posting for the day, 06/18/2026. She stated she worked this morning but was still filling the document out prior to her leaving for her appointment and therefore did not post it at that time. She stated she got side tracked. She stated she did post the document yesterday, 06/17/2026 after the morning meeting at 09:00 a.m. She stated she did not know why the posted document at 12:05 p.m. was dated 06/16/2026. She stated she thought she might have mis-dated the document. She stated she believed she posted the correct information for yesterday's census and nurse staffing but put the wrong date. She stated the impact of the document not being posted would be that for anyone that comes into the facility, not knowing the hours of staff working on the floor. During an interview on 06/18/2026 at 07:09 p.m., the ADMIN stated normally the HR posted the daily census and nurse staffing posting in the morning, no later than 09:30 a.m. She stated she did not believe there would be any type of resident impact from the document having not been posted but there was an impact on a regulatory standpoint. The ADMIN stated she knew the HR was going to be out of the building for part of the day, on 06/18/2026. Record review of the facility's policy titled, Nurse Staffing Posting Information, dated copyright 2025, revealed, Policy: It is the policy of this facility to make nurse staffing information readily available in a readable format to residents, staff, and visitors at any given time.Policy Explanation and Compliance Guidelines:1. The Nurse Staffing Sheet will be posted on a daily basis and will contain the following information: . b. The current date .2. The facility will post the Nurse Staffing Sheet at the beginning of each shift.