

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675438	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/03/2026
NAME OF PROVIDER OR SUPPLIER  Lakeshore Village Nursing and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE  2320 Lake Shore Dr Waco, TX 76708	

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 0562</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide immediate access to any resident.</p> <p>Based on interviews and record reviews, the facility failed to allow immediate access to residents by a state representative of HHSC in that: The facility's Administrator refused to allow a HHSC Employee to enter the facility on 03/03/2026 at 09:04 am to conduct a Priority One investigation. This failure placed all 123 residents at risk of potential harm due to a P1 investigation not being conducted to rule out immediacy. Findings included: Observation and interview on 03/03/2026 at about 08:55 am revealed a Representative of HHSC arrived at the facility and was told to wait for the Administrator in the lobby. Observation and interview on 03/03/2026 at about 09:04 am reflected the Administrator arrived in the facility's lobby and told the Representative of HHSC that, they're going to have to send somebody else. I filed a complaint against you. He further stated the resolution to his complaint was that the Representative of HHCS would not be allowed back in the building. Observation and interview on 03/03/2026 at about 9:47 am revealed that the HHSC Representative exited the facility's parking lot due not being allowed by the Administrator to conduct an investigation. Record review of census information provided by the facility revealed the census on 3/3/2026 was 123 residents. Record review of the Health and Safety Code Ch 242: Sec.242.043. Inspections reflected. (a) The commission or the commission representative may make any inspection, including an unannounced inspection or follow-up inspection, survey, or investigation that it considers necessary and may enter the premises of an institution at reasonable times to make an inspection, survey, or investigation in accordance with department rules. Review of Texas Health and Human Services Commission Provider Letter PL18-26, dated December 10, 2018, entitled Providing Access to Electronic Health Records revealed: The Texas Health and Human Services Commission (HHSC) is issuing this letter as a replacement of PL 18-10 to inform provider of the following updated information as it applies to all provider types. Providers must grant access to all electronic health records when requested by a surveyor.</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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