STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675625	A. Building B. Wing	02/12/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at Pasadena	4300 Vista Rd Pasadena, TX 77504

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 0812 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards. Based on observation, interview, and record review, the facility failed to store, prepare, distribute, and serve food in accordance with professional standards for food service safety in 1 of 1 kitchen reviewed for food procurement in that: -Food items expired, and Food items not labeled or dated.These failures could affect residents who ate food from the facility kitchen and place them at risk of foodborne illness and disease.Findings include:Observation of the facility's kitchen and interview on 02/10/26 between 8:23 am and 8:30 am with Dietary [NAME] A revealed the following: A container of what appeared to be beans; it was not labeled or dated in the pantry A container of what appeared to be rice; it was not labeled or dated in the pantryApproximately 42 cups of tea in the refrigerator with no lidsA bag of what appeared to be cabbage that had brown residue in the refrigeratorIn an interview on 02/10/26 at 8:24AM with Dietary [NAME] A, she stated all items were supposed to be labeled with dates and name and she stated, I am about to label it now. When asked additional questions, she reported the dietary manager would be able to assist with additional questions.In an interview on 02/10/26 at 8:44AM with the Dietary Manager; she stated all items in the kitchen must be labeled with names and dates. She stated that when items were repackaged, they created labels for them. She stated the cooks and aides were responsible for labeling and dating the items in the kitchen, but they were to inform her of the items that needed to be removed and she discarded them. She stated when prepping drinks for lunch, the staff were supposed to cover the cups with saran wrap or a tray was placed on top of the drinks until they serve them. She stated the purpose of covering the drinks was to ensure that nothing gets inside of them. She stated she disposed of expired items on Tuesdays when the food truck arrives. She stated she planned to remove the items today (Tuesday) because the food truck was scheduled for today. She stated the risk of having expired items was food poison. Record review of the facility's Food Receiving and Storage policy revised November 2022, stated; .4. Dry foods that are stored in bins are removed from original packaging, labeled, and dated (use by date). Such foods are rotated using a first in-first out system.7. Refrigerated foods are labeled, dated and monitored so they are used by their use-by date, frozen, or discarded.

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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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	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 safe, clean and comfortable homelike environment for 1 of 8 residents (Resident #11) reviewed for a homelike environment. The facility failed to ensure that Resident #11's room was a clean and comfortable homelike environment.The failure could place residents at risk for an uncomfortable, unhomelike environment, and a diminished quality of life. Findings included: Record review of Resident #11's face sheet dated 2/12/26, revealed the resident was an [AGE] year-old female admitted to the facility on [DATE] with diagnoses including Parkinson's Disease (progressive neurological disorder that primarily affects movement) without Dyskinesia (uncontrollable and involuntary movements). Record review of Resident #11's quarterly MDS dated [DATE], section C revealed a BIMS was not conducted as Resident #11 was rarely or never understood. Observation on 2/10/26 at 9:47 a.m. revealed a brown substance on the bottom edge of the privacy curtain on A bed's side in the middle of Resident 11's room. The brown substance was 6 inches wide and 4 inches tall.Observation on 2/11/26 at 9:30 a.m. revealed the brown substance on the privacy curtain in Resident 11's room was unchanged from the previous observation. Observation on 2/11/26 at 1:29 p.m. revealed the brown substance on the privacy curtain in Resident 11's room was unchanged from the previous observations.During interview on 2/11/26 at 1:31 p.m., CNA H said they had not noticed the brown area on the privacy curtain in Resident 11's room. CNA H said she did not work yesterday and the brown substance was not on the privacy curtain when she last worked which was on 2/9/26. CNA H said the process regarding notifying regarding a situation like this was to notify the nurse and then the nurse would write a communication form to tell maintenance or housekeeping to take the curtain down. During interview on 2/11/26 at 2:02 p.m., Housekeeping A stated he was assigned to the orange hall where Resident #11's room was located and worked from 6 a.m. to 2 p.m. Housekeeping A stated he was off work yesterday. Housekeeping A stated he was cleaning Resident 11's room when he was called in to speak with surveyors. Housekeeping A stated that when the residents' privacy curtains were dirty, they would disinfect them and if they were not able to spot clean then they send them to laundry to be washed but most of the time the curtains do not get that dirty.During observation on 2/11/26 at 2:10 p.m., Housekeeper A accompanied the surveyor to Resident 11's room where they observed the brown spot on the privacy curtain. After observing the brown spot on the privacy curtain, Housekeeper A said the privacy curtain would have to be taken off the ceiling and sent out to the laundry. Regarding possible outcomes for the resident if the privacy curtain was dirty, Housekeeper A said he would not have the privacy curtain come in contact with the resident and mostly there was only food on the privacy curtains which wasn't hard to get rid of and he had cleaner for that kind of dirt and filth. During interview on 2/12/26 at 9:03 a.m., the DON said resident rooms should be cleaned every shift and as needed. The DON said areas in the resident rooms should be cleaned immediately if areas were observed to be dirty. The DON said they saw the area was in Resident 11's room after they were notified by the surveyor and they took the curtain down right away. The DON said she knew the area on the curtain in Resident 11's room was a stain but was unsure what the area on the curtain in Resident 11's room was. The DON said the resident in room with the stain was bedbound so she would not touch the area, but it would not be good to look at. The DON said an effect a resident could have if not bed bound was hard to say as they did not know what the substance was. Observation on 2/12/26 at 10:41 a.m. revealed a different color privacy curtain in Resident 11's room and the privacy curtain was clean. Interview on 2/12/26 at 11:11 a.m., the Administrator said her expectation was that the housekeeping staff should clean the resident rooms daily. The Administrator said dirty items like the privacy curtain in Resident 11's room should be cleaned. The Administrator said she did not know what the substance was on the privacy curtain in Resident 11's room. The Administrator said it (continued on next page)

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	was everybody's responsibility to make sure the residents' rooms were clean. The Administrator said regarding the substance on the privacy curtain in Resident 11's room she cannot say that there could be a negative outcome. During interview on 2/12/26 at 11:17 a.m., the Housekeeping Supervisor said they took care of the privacy curtain in Resident 11's room . The Housekeeping Supervisor said it was the expectation that the residents' rooms were cleaned daily and more if need be. The Housekeeping Supervisor said any of the staff should be observing for anything in the residents' rooms that were excessively dirty and was not limited to one department. The Housekeeping Supervisor said if the privacy curtains were dirty, the process was to take down the privacy curtain and clean them in the laundry and replace the privacy curtain. The Housekeeping Supervisor said as far as the privacy curtain being dirty, she did not know if there were any potential negative effects for the residents. The Housekeeping Supervisor said if there were hazardous materials or spills, then we immediately get that. The Housekeeping Supervisor said it could make anybody sick if they touched stool, but they do not let it get that far. The Housekeeping Supervisor said brand new housekeeping staff get three days of training including going through the job description of what they were supposed to do, show them how to deep clean which included moving the furniture, using correct PPE, how to clean bathroom, training on chemicals, potential hazards and what to do if it gets on them, to notify them if they see anything, if they see anything that was not right and to make room rounds. Record review of the facility's policy Homelike Environment revised February 2021 revealed the facility staff and management maximizes the characteristics of the facility that reflect a personalized, homelike setting which included the characteristics of a clean, sanitary and orderly environment.