

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 675809	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/04/2026
NAME OF PROVIDER OR SUPPLIER Avir at Lancaster		STREET ADDRESS, CITY, STATE, ZIP CODE 1241 Westridge Ave Lancaster, TX 75146	
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 - Some	Keep residents' personal and medical records private and confidential. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure the resident's right to personal privacy and confidentiality or 3 (Resident #1, #2, and #3) of 3 reviewed for personal privacy. The facility failed to ensure CNA-A did not use her personal phone to record Residents #1, #2, and #3 and posted the images to her public social media platform without permission from the residents or representatives. This failure could place residents at risk of psychological harm. Photo observed on public social media of CNA-A revealed Resident #1 smiling and looking toward the camera with the caption, Memory care everyone daddy [Resident #1's nick name] says he remembers some words. CNA-A's photo was in the middle right side of the photo with 16.5 hearts, 471 comments, 487 saves, and 3,752 shares. Photo observed on public social media of CNA-A revealed Resident #2 standing in the hallway with her hands in a half raised position with the caption, When you live in memory care and a song come on and bring back old memories. CNA-A's photo was in the middle right side of the photo with 16.5 hearts, 471 comments, 487 saves, and 3,752 shares. Photo observed on public social media of CNA-A revealed Resident #3 in the hallway standing on a walker (walking assistance device that provides support with walking) with the caption, Everyone in memory care has a song that brings it all out. CNA-A's login identification was located under the social media logo. 1. Record review of Resident #1's comprehensive MDS dated [DATE], reflected he was a [AGE] year-old male admitted to the facility 04/05/25 with diagnoses of paranoid schizophrenia (a chronic brain disorder characterized by intense, irrational paranoia, auditory hallucinations), and major depressive disorder (a common severe mental health condition characterized by persistent sadness, loss of interest, low energy). He had a BIMS of 14 indicating he was cognitively intact (sufficient mental capacity to manage normal daily demands, including adequate judgment, planning, organization, and self-control). During an interview with Resident #1 on 05/04/26 at 11:48 a.m. he stated he had not given anyone permission to record him and put the video on the internet. He stated if someone had taken pictures of him and put them on the internet it was an invasion of his privacy and he would not be happy with it. He denied he had seen anyone take a picture of him while he was in the facility. 2. Record review of Resident #2's Quarterly MDS dated [DATE], reflected she was an [AGE] year-old female originally admitted to the facility 11/12/25 with diagnoses of intermittent explosive disorder (a mental health condition characterized by recurrent, sudden episodes of impulsive, aggressive, or violent behavior, where reactions are grossly out of proportion to the situation), dementia (umbrella term for a progressive decline in memory, thinking, and behavior), and major depressive disorder (a common severe mental health condition characterized by persistent sadness) She had a BIMS score of 06 indicating severe impairment (a physical or mental condition that significantly limits an individual's ability to perform basic work activities, such as walking, sitting, lifting, or understanding instructions). During an attempted interview with Resident #2 on 05/04/26 at 10:58 a.m., she did not respond to any questions posed to her regarding a video taken of her and posted on a staff member's social media, all of her responses were that she wanted to go and smoke her cigarette. 3. Record review of Resident #3's Quarterly MDS dated [DATE] reflected she was a [AGE] year-old female originally admitted to the facility 11/12/12 with diagnoses of schizophrenia (chronic, severe brain disorder), schizoaffective (continued on next page)		

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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 675809
		If continuation sheet Page 1 of 2

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F 0583 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	disorder(a chronic mental health condition characterized by a combination of schizophrenia symptoms -such as hallucinations or delusions-and mood disorder symptoms, such as mania (state of abnormally elevated arousal, energy, and mood) or depression (a serious, common medical illness causing persistent sadness, loss or interest, and physical symptoms that interfere with daily life for two weeks or more)). She had a BIMS score of 03 indicating severe impairment (a physical or mental condition that significantly limits an individual's ability to perform basic work activities, such as walking, sitting, lifting, or understanding instructions). During an attempted interview with Resident #3 on 05/04/26 at 1:50 p.m., she did not respond to any questions posed to her including questions regarding a video taken of her and posted on a staff member's social media. During a telephone interview with CNA-A on 05/04/26 at 1:44 p.m., she stated she took pictures of some residents and employees while they were dancing during a pizza party they were having on 05/04/26. She denied she put the pictures of residents on her social media page. When she was informed there were video/pictures of residents with her face from her social media page provided for the investigation, she still denied she had posted the video/pictures. She stated she changed the handle on social media depending on what she was posting. She stated she had recently changed her profile because she had posted pictures of her family. She stated a risk to posting pictures/videos of residents on social media could be exploitation or psychological harm. During an interview and observation with Administrator on 05/04/26 at 2:00 p.m., he stated he had been notified by the ADON on the evening of 05/01/26 that CNA-A had posted photos of some residents on her social media. He stated he had reached out to CNA-A to let her know she should not come to work until after the investigation was completed. He stated CNA-A denied she had posted a video/picture of the residents. He reviewed the pictures used for the investigation; he confirmed CNA-A's picture was on the right side of the residents' photos. He stated they completed educational training with the staff on 05/04/26 regarding using cell phones while on the floor working. He stated he had informed all staff that they should protect the residents' rights and always keep all of their information confidential. He stated during his investigation he determined CNA had posted the video/pictures on her social media account when he saw the photos with her face and name on the account. He stated the residents had been at risk of psychological harm and privacy when their pictures/video were posted on public social media. During interview with ADON on 05/04/26 at 2:29 p.m., she stated a CNA had sent her the picture on 04/30/26, she stated she did not see anything on the video that was harmful to the residents. She stated she waited to notify the administrator the next day. She stated the residents had been at risk of psychological harm and embarrassment. In a confidential witness interview on an undisclosed date at an undisclosed time, the witness stated at the time of interview they had not been notified by the facility of the privacy violation. They stated their family member had not shown any changes in condition because of having the photo/video posted to social media. Record review of CNA-A signed and dated 02/13/26, facility handbook indicating she was informed, employees must maintain resident/patient privacy, also known as protected health information (PHI) and comply with all HIPAA regulations. Therefore, employees may not communicate or upload on any social media site any PHI, pictures or images of residents/patients or resident/patient property. Record review of facility Phones on Floor in-service dated 05/04/26 reflected, there should be no phone usage while on duty, absolutely No Recording of Residents at any time. Record review of facility undated Resident's Rights policy reflected, CNA-A signed and dated 02/13/26 A resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility. As an employee of this facility, you must protect and promote the rights of each resident. Violations of any of the resident rights are against the law. A resident may not be threatened, coerced, intimidated, or retaliated against because he or she chooses to exercise his/her rights. Violation of a resident's rights by any employee of the facility will result in disciplinary action up to termination and possibly criminal and/or civil prosecution. A resident has right to: d. Be treated with courtesy, consideration, and respect. Privacy, including privacy during visits and telephone calls		