STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	675871	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Avir at Comfort	615 Faltin Ave Comfort, TX 78013

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 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to develop and implement a comprehensive person-centered care plan for each resident to meet the resident's psychosocial needs for 3 of 3 residents (Residents #1, 2, and 3) reviewed for comprehensive care planning. The facility failed to ensure residents' preferences for activities and leisure were addressed in the comprehensive care plans for Residents #1, 2, and 3. This failure could result in decreased quality of life. Findings included: Record review of Resident #1's Face Sheet reflected a [AGE] year-old female admitted to the facility on [DATE]. Relevant diagnoses included bipolar disorder (a mental health disorder characterized by severe mood swings). Record review of Resident #1's quarterly MDS submitted 3/5/2026 reflected a BIMS score of 15, which indicated intact cognition. Record review of Resident #1's Activities- Quarterly/Annual Participation Review dated 10/14/2025 reflected the following: .2. Describe resident's favorite activities, special accomplishments, and/or new interests.Arts and Crafts [sic], Coloring [sic], Gardening [sic]. Resident is very involved in all matters of activities at the facility and frequently becomes creative with the Activities Director to assist in facilitation of activities . Record review of Resident #1's Care Plan Report undated/ printed 5/27/2026 did not reveal person-centered care planning related to Resident #1's preferences of activities. Record review of Resident #2's Face Sheet reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included hemiplegia and hemiparesis following cerebral infarction affecting left non dominant side (decreased ability of the left side of the body as a result of neurological damage from a blood clot in the brain). Record review of Resident #2's quarterly MDS submitted 4/06/2026 reflected a BIMS score of 15, which indicated intact cognition. Record review of Resident #2's Activities- Quarterly/Annual Participation Review dated 1/07/2026 reflected the following: .2. Describe resident's favorite activities, special accomplishments, and/or new interests.Loves all activities . Record review of Resident #2's Care Plan Report undated/printed 5/27/2026 did not reveal person-centered care planning related to Resident #2's preferences of activities. Record review of Resident #3's Face Sheet reflected an [AGE] year-old female admitted to the facility on [DATE]. Relevant diagnoses included Alzheimer's disease (a progressive neurological disorder that affects memory, thinking, and behavior). Record review of Resident #3's quarterly MDS submitted 4/30/2026 reflected a BIMS score of 12, which indicated moderately impaired cognition. Record review of Resident #3's Activities- Quarterly/Annual Participation Review dated 5/18/2026 reflected the following: .2. Describe resident's favorite activities, special accomplishments, and/or new interests.Resident loves crating unique crafts/art, bingo, social gatherings, manicures/makeup, family visits, music, movies, most all activities [sic]. She enjoys going on outings and visiting with friends and family . Record review of Resident #3's Care Plan Report undated/printed 5/27/2026 did not reveal person-centered care planning related to Resident #3's preferences of activities. In an interview on 5/27/2026 at 9:50 AM, the LSW said the Activities Director did not attend routine care plan conferences. He said the conferences reviewed residents' preferences for activities, but the inclusion of that information into the care plan is performed by the DON. In an interview on 5/27/2026 (continued on next page)

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

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F 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	at 1:42 PM, the AD said the facility procedure for care plan conferences did not include her. She was unsure if residents' preferences for activities were reviewed during these conferences. She was unsure if residents' care plans included preferences and/or accommodations needed for activities. She said allowing residents the options to participate in activities they enjoyed was important to their overall well-being and healing. In an interview on 5/27/2026 at 2:54 PM, the Admin said the facility was undergoing a progress change for care plan conferences that would include the activities department. She said the current process was the care conferences were attended only by the LSW and DON, and all care areas were reviewed. She said the staff were aware of residents' activities preferences because the census was small and the staff had become familiar with the residents over time. In an interview on 5/27/2026 at 3:45 PM, the DON said she was responsible for creating resident's care plans. She said residents' preferences and needs were reviewed during care plan conferences, but the facility was instituting a new process that would include the Activities Director at all care plan conferences. She said the care plans did not include specific preferences, but she made the preferences known to staff during routine, weekly staff meetings. Record review of the facility policy Care Plans, Comprehensive Person-Centered dated 2001, revised March 2022 reflected the following: .7. The comprehensive, person-centered care plan: . b. describes the services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being .

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F 0679 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Provide activities to meet all resident's needs. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to ensure residents received an ongoing program to support residents in their choice of activities, both facility-sponsored group and individual activities and independent activities, designed to meet the interests of and support the physical, mental, and psychosocial well-being of each resident for 3 of 3 residents (Residents #1, #2, and #-3) reviewed for activities. The facility failed to ensure residents #1, #2, and #3 had the option of participating in daily, organized activities to meet the residents' psychosocial needs and preferences during May 2026. This failure could result in decreased psychosocial well-being or decreased quality of life. Findings included:Record review of the activities calendar dated May 2026 reflected SELF-DIRECTED ACTIVITIES [sic] listed on every Saturday and Sunday of the month, totaling 10 days. Record review of Resident #1's Face Sheet reflected a [AGE] year-old female admitted to the facility on [DATE]. Relevant diagnoses included bipolar disorder (a mental health disorder characterized by severe mood swings). Record review of Resident #1's quarterly MDS submitted 3/5/2026 reflected a BIMS score of 15, which indicated intact cognition. In an interview on 5/27/2026 at 9:45 AM, Resident #1 said the activities posted on the monthly calendar were frequently cancelled without notice, and the only consistent activities were hosted by members of the community. She said the coffee social scheduled at 10:00 AM on 5/27/2026 and most other weekdays would not occur because the event was never actually hosted by the facility. She said the self-directed activities on the weekends in May meant there was nothing scheduled for residents to do on the weekends except watch television. She said this had been occurring for several months, and the lack of activities made her feel terrible. Record review of Resident #2's Face Sheet reflected a [AGE] year-old male admitted to the facility on [DATE]. Relevant diagnoses included hemiplegia and hemiparesis following cerebral infarction affecting left non dominant side (decreased ability of the left side of the body because of neurological damage from a blood clot in the brain).Record review of Resident #2's quarterly MDS submitted 4/06/2026 reflected a BIMS score of 15, which indicated intact cognition.In an interview on 5/27/2026 at 11:58 AM, Resident #2 said he was satisfied with the activities program, but he wished there were activities on the weekends to help the time pass. Record review of Resident #3's Face Sheet reflected an [AGE] year-old female admitted to the facility on [DATE]. Relevant diagnoses included Alzheimer's disease (a progressive neurological disorder that affects memory, thinking, and behavior). Record review of Resident #3's quarterly MDS submitted 4/30/2026 reflected a BIMS score of 12, which indicated moderately impaired cognition. Record review of Resident #3's Activities-Quarterly/Annual Participation Review dated 5/18/2026 reflected the following: .2. Describe resident's favorite activities, special accomplishments, and/or new interests.Resident loves crafting unique crafts/art, bingo, social gatherings, manicures/makeup, family visits, music, movies, most all activities [sic]. She enjoys going on outings and visiting with friends and family .Resident #3 declined to participate in an interview on 5/27/2026 at 12:15 PM. In an interview with CNA A on 5/27/2026 at 10:10 AM, she said there was no coffee social or other organized activity occurring at the facility at that time. She said the activities calendar did not reflect which activities were actually hosted at the facility, and residents frequently reported that they were bored due to lack of activities. She said she felt like residents were at risk for becoming sad or depressed due to not having consistent activities. In an interview with the AD on 5/27/2026 at 1:42 PM, she said she was unsure if the coffee social scheduled for 10:00 AM that day had occurred because she was late to work and had not yet arrived by that time. She said she had not called anyone to ask them to host the event in her absence. She also said approximately 2 to 3 scheduled activities were cancelled per week due to various reasons, and her back-up activities consisted of an activity cart with snacks and independent activities on it. She said that she scheduled the weekend activities as self-directed due to a conflict with a resident regarding the type of activities on weekends. She said she prepares activity packets on Friday (continued on next page)

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F 0679 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	afternoons for any interested residents to use for entertainment, and the corporate company of the facility was displeased with her decision to include self-directed activity on the calendar for the weekends. She felt residents were receiving adequate stimulation through activities, and the potential harm of not having enough activities to meet residents' needs was decreased quality of life. In an interview with the Admin. on 5/27/2026 at 2:54 PM, she said was aware the scheduled activity for every weekend in May 2026 was self-directed. She said she had not approved of this activity and had seen the schedule when the calendar was posted by the AD. She said this activity did not meet the standards of the facility, but she did not discuss the deficiency with the AD due to ongoing performance issues. She said the AD had been on a performance improvement plan since January 2026 due to complaints from residents and staff about lack of activities, poor communication, and inconsistent efforts to engage residents in activities, and the AD had resigned effective June 2026. Record review of the facility policy titled Activity Programs dated June 2018 reflected the following: . 6. Activities are scheduled 7 (seven) days a week and residents are given an opportunity to contribute to the planning, preparation, conducting, cleanup and critique of the programs .