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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION               | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>676034 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                            | (X3) DATE SURVEY COMPLETED<br><br>04/12/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Brady West Rehab & Nursing |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>2201 Menard Hwy<br>Brady, TX 76825 |  |

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<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)  |
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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44766</b></p> <p>Based on observation, interview, and record review the facility failed to have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial wellbeing for 5 (Residents #1, #2, #3, #4, and #5) of 10 residents reviewed for staffing concerns.</p> <ol style="list-style-type: none"> <li>The facility failed to ensure there were sufficient staff per the facility assessment.</li> <li>The facility failed to ensure there were sufficient staff to ensure Residents #1-#5 received their showers.</li> </ol> <p>This failure could place residents at risk of not getting needed care and services, a decrease in quality of care and quality of life and/or injury.</p> <p>Findings included:</p> <p>Resident #1</p> <p>Record review of Resident #1's face sheet, dated 4/12/24, reflected a [AGE] year-old male with an admitted [DATE]. Resident #1 had a diagnosis which included Dementia, Hyperlipidemia, and muscle wasting.</p> <p>Record review of Resident #1's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 8, indicating moderate cognitive impairment.</p> <p>During an interview on 4/10/24 at 11:15 am, Resident #1 stated there had been a few occasions in the past month or two in which he was told by staff that he would not get a shower that day because the staff did not have time. He stated that she has no skin issues and that as long as she got a shower during the week, he was happy.</p> <p>Resident #2</p> <p>(continued on next page)</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>Record review of Resident #2's face sheet, dated 4/12/24, reflected a [AGE] year-old female with an admitted [DATE]. Resident #2 had a diagnosis which included Lymphoma, mild intellectual disabilities, and muscle wasting.</p> <p>Record review of Resident #2's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 7, indicating moderate cognitive impairment.</p> <p>Record review of Resident #2's shower log indicated from 3/28/24 to 4/6/24 no shower received, notating shower, not applicable.</p> <p>During an interview on 4/11/24 at 11:45 PM, Resident #2 stated there have been days she had missed her showers because she was told that they could not get to her due to staffing. She stated she could not remember exact dates. She stated she missed a shower on average once a week. She stated she did not have any issues with her skin even when missing a shower. She stated missing showers here and there did not really affect her in any way.</p> <p>Resident #3</p> <p>Record review of Resident #3's face sheet, dated 4/12/24, reflected a [AGE] year-old female with an admitted [DATE]. Resident #3 had a diagnosis which included Orthopedic aftercare, type 2 diabetes mellitus, and hypothyroidism.</p> <p>Record review of Resident #3's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 7, indicating moderate cognitive impairment.</p> <p>Record review of Resident #3's shower log indicated from 3/22/24 to 4/3/24 no shower received, notating shower, not applicable.</p> <p>During an interview on 4/11/24 at 12:55 PM, Resident #3 stated that she got a shower on 04/10/24 but before that it had been two weeks since her previous shower. She stated that she does not have any skin issues at all and is not concerned with missing a shower.</p> <p>Resident #4</p> <p>Record review of Resident #4's face sheet, dated 4/12/24, reflected a [AGE] year-old female with an admitted [DATE]. Resident #4 had a diagnosis which included kidney disease, anemia, and type 2 diabetes.</p> <p>Record review of Resident #4's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 11, indicating moderate cognitive impairment.</p> <p>During an interview on 4/11/24 at 1:00 PM Resident #4 stated she had received a shower the day before yesterday but before that it's been about a week. She stated she did not mind missing a shower and she did not have any skin issues due to missing any showers.</p> <p>Resident #5</p> <p>(continued on next page)</p> |   |  |

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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Record review of Resident #5's face sheet, dated 4/12/24, reflected a [AGE] year-old female with an admitted [DATE]. Resident #5 had a diagnosis which included pulmonary disease, anemia, and kidney disease.</p> <p>Record review of Resident #5's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 15, indicating no cognitive impairment.</p> <p>Record review of Resident #5's shower log indicated no shower received on 3/27/24, 4/5/24, and 4/10/24 notating shower, not applicable.</p> <p>During an interview on 4/12/24 at 12:45 PM Resident #5 stated that she had missed a few showers a month or so ago. She stated she was told by staff that there was not enough staff, and they could not get to her shower for that day. She stated she didn't care about missing showers and she did not have any skin break down due to missing her showers.</p> <p>Record review of Facility's Staff Clocking in and Clocking out per shift time sheets revealed the following:</p> <p>February 2024:</p> <p>2/1/24 Night shift from 10pm to 6 am with one RN and one CNA.</p> <p>2/2/24 Night shift two RN and one CNA.</p> <p>2/3/24 Night shift one RN and two CNA.</p> <p>2/4/24 Night shift two RN and one CNA.</p> <p>4/2/24 Day shift from 6AM to 11:15AM one CNA, showers missed.</p> <p>4/6/24 Day shift from 7AM to 2PM two RN's and 2 CNA's, showers missed.</p> <p>4/7/24 Night shift from 10 PM to 11:45 PM one HA and one LVN.</p> <p>During a telephone interview on 4/10/24 at 11:30 AM LVN A stated that staffing was not good at the facility. She stated there had been times when it was just one RN and CNA or one RN and one HA. She stated the biggest issues they were running into was that residents were not getting their showers because of the lack of staffing. She stated she did inform both the DON and Administrator and they stated to her they were working on it.</p> <p>During an interview on 4/10/24 at 1:05 PM the Ombudsman stated he was first emailed by staff on March 8th regarding the cold showers for residents. He stated showers have been missed either because there was not enough staffing or because the showers were too cold, and residents did not want a cold shower.</p> <p>(continued on next page)</p> |

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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>During an interview on 4/10/24 at 1:45 PM CNA B stated that on 4/6/24 Saturday she stated she knows she could not do showers that day because there were not enough employees. She stated it happens more than it should. She stated its mainly a lack of CNAs to get the showers complete. She stated there were times where it was one RN and one CNA during a day shift or the same for a night shift.</p> <p>During an interview on 4/11/24 at 1:35 PM CNA C stated there were days where she just could not get to resident showers due to not having enough employees on shift for her to do everything. She stated she cannot remember exactly which days but tried her best to get them done. She stated it was difficult to get everything done even with 3 CNA's but there was a lot of time where they only have 2 CNAs for the 38 residents.</p> <p>During an interview on 4/11/24 at 2:15 PM CNA D stated last week he did not get to showers at all on 4/2/24 Tuesdays, because he stated he was the only CNA, and the DON was the only RN. He stated from 6am to 11am it was only him and the DON in the facility. He stated this kind of thing happens more than it should.</p> <p>During a telephone interview on 4/12/24 at 11:45 AM LVN E stated that on 4/7/24 there was a time from about 10 pm to 11:45 pm that he was the only nurse and he had one HA with him. He stated that due to the staffing concerns and issues he had requested with his agency he no longer wants to work for the facility because the staffing was putting the residents at risk.</p> <p>During an interview on 4/12/24 at 2:30 PM the Administrator stated staffing was a little hard right now. She stated that they lost an RN and nights were a little short. She stated that just recently in April she had resulted in using agency to really try and cover all the shifts. She stated she was working hard to have multiple HA's finish getting certified and have more CNA's. She stated she knows they have been short here or there.</p> <p>During an interview on 4/12/24 at 2:45 PM the DON stated staffing was difficult at this time. She stated that the numbers were difficult because of being in a small town and getting people to stay. She stated that the facility was trying their best to not only get more staff but use agency to cover everything. She stated that she knows some showers have been missed they do try their best to get them within a day or two. She stated she knows that this was not right for the residents because they could get rashes or other skin breakdown due to lack of showers.</p> <p>Record review of Facility assessment dated [DATE] indicated Average Nurse Aide/Resident Ratio (Direct Care Staff) 1/13 (1 Nurse Aide to 13 residents) and Average Licensed Nurse/Resident ratio (Direct care Staff) 1/19 (1 Licensed Nurse to 19 residents).</p> <p>During an interview on 4/11/24 at 11:30 AM, the Administrator stated that the 1/13 ratio listed in facility assessment was for how many CNAs needed to be on staff per residents in the building. With the facility census of 38 and the 1/13 ratio, the facility should be staffed with 3 CNAs per shift in the building. The 1/19 ratio for RN's/LVN's should be 2 Licensed Nurse per the census in the building. She stated that that was the correct numbers that she understood for the building. She stated that at night, facility administration would reduce to 1 RN and 2 CNA due to less medication being given, no showers and residents were usually sleeping. She stated she was not sure if night staffing was notated in the facility assessments but does not think so. She stated she did not know that a reduction in night staff should be notated in the facility assessment, so based on the facility assessment she should have 3 CNA's and 2 RN's.</p> <p>(continued on next page)</p> |   |  |

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| F 0725<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Some                           | Record review of Facility policy dated 4/10/22 titled: Nursing services and Sufficient Staff indicated: it is the policy of this facility to provide sufficient staff with appropriate competencies and skillsets to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident. The facility's census, acuity and diagnoses of the resident population will be considered based on the facility assessment. |   |  |

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| <p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44766</b></p> <p>Based on observations, interview and record review, The facility failed to maintain complete and accurately documented medical records on 3 (Resident #3, #6, and #7) of 9 residents reviewed.</p> <p>The facility failed to have matching documentation of shower logs vs shower task in electronic system for Residents #3, #6, and #7.</p> <p>This failure could place residents at risk of not having proper hygiene.</p> <p>Findings Included:</p> <p>Resident #3</p> <p>Record review of Resident #3's face sheet, dated 4/12/24, reflected an [AGE] year-old female with an admitted [DATE]. Resident #3 had a diagnosis which included Orthopedic aftercare, type 2 diabetes mellitus, and hypothyroidism.</p> <p>Record review of Resident #3's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 7, indicating moderate cognitive impairment.</p> <p>Record review of Skin observation worksheet indicated Resident #3 received showers on 3/21/24 and 4/3/24. Documented by CNA C.</p> <p>Record review of electronic system bathing task indicated Resident #3 did not receive a shower on 3/21/24 or 4/3/24.</p> <p>Resident #6</p> <p>Record review of Resident #6's face sheet, dated 4/12/24, reflected an [AGE] year-old male with an admitted [DATE]. Resident #6 had a diagnosis which included Cerebral infraction, hypertension, and insomnia.</p> <p>Record review of Resident #6's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 11, indicating no cognitive impairment.</p> <p>Record review of Skin observation worksheet indicated Resident #6 received showers on 4/2/24 and 4/4/24.</p> <p>Record review of electronic system bathing task indicated Resident #6 did not receive a shower on 4/2/24 or 4/4/24.</p> <p>Resident #7</p> <p>(continued on next page)</p> |

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| <p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>                     | <p>Record review of Resident #7's face sheet, dated 4/12/24, reflected a [AGE] year-old male with an admitted [DATE]. Resident #7 had a diagnosis which included Heart failure, anxiety disorder, and Hypertension.</p> <p>Record review of Resident #7's MDS dated [DATE] with a quarterly assessment dated [DATE] indicated BIMS of 15, indicating no cognitive impairment.</p> <p>Record review of Skin observation worksheet indicated Resident #7 received showers on 4/2/24 and 4/4/24.</p> <p>Record review of electronic system bathing task indicated Resident #7 did not receive a shower on 4/2/24 or 4/4/24.</p> <p>During an interview on 4/11/24 at 1:35 PM CNA C stated she started rushing sometimes and forgot to put in the bathing task indicating what she had done for that day in the electronic system. She stated sometimes she also forgot to do a skin observation worksheet. She stated she knew she should do both at the same time so the dates match but forgot to or got too busy.</p> <p>During an interview on 4/11/24 at 1:45 PM CNA D stated he forgot to go into the showering task in the electronic system to put the shower was complete. He stated there were probably multiple days in which he had a skin observation worksheet completed, but no shower completed in the electronic system because he gets too busy and forgot.</p> <p>During an interview on 4/12/24 at 2:15 PM ADON stated based on the shower logs being reviewed, Resident #8 had not had a shower for over a month. She stated she was not exactly sure why there were skin observation worksheets and bathing task in the electronic system that do not match. She stated it should not be like that and she was not sure why they do not match. She stated shower log sheets should match the task completed in the electronic system. She stated but ours do not match.</p> <p>Record review of facility's policy titled: Clinical document guidelines with a review date of 2/14/20 indicated: the patients clinical record provides a record of the health status, including observations, measurements, history, and prognosis and serves as the primary document describing healthcare services provided to the patient.</p> |   |  |

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| <p>F 0908</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>Keep all essential equipment working safely.</p> <p>44766</p> <p>Based on observation, interview, and record review, the facility failed to maintain all mechanical, electrical, and patient care Equipment in safe operating condition for 2 (Hot water heater #1 and #2) of 3 reviewed for essential equipment.</p> <p>The facility failed to repair or replace the hot water heater that supplied hot water for Halls 1, 2 and 3, 4 for days.</p> <p>This failure could place residents at risk for poor hygiene and health.</p> <p>Findings include:</p> <p>Observation on 4/10/24 at 4:15 AM revealed hot water in all showers on halls 1 (hot water heater #1) and 4 (hot water heater #2) went from hot water to cold water in 10 min. At 4:25 AM water in shower on hallway 1 was cold to touch. At 4:27 AM water in shower on hallway 4 was cold to touch.</p> <p>Record review of Plumbing company A dated 3/7/24 indicated work to be done on both water heaters by replacing piping on both water heater #1 and #2.</p> <p>Record review of Plumbing company B dated 4/3/24 indicated and estimate to have both hot water heaters replaced.</p> <p>During an interview on 4/8/24 at 10:10am with the facility Administrator stated that she first heard about the shower temperature not staying hot in early March 2024. She stated that the facility finally requested 2 different quotes to replace the hot water heaters on 4/3/24. She stated they just made the decision on 4/8/24 to fix 2/3 of the hot water heaters that provided water to hallways 1,2 and 3,4.</p> <p>During an interview on 4/8/24 at 10:34am, the Maintenance Director stated the hot water heater for Halls 1,2 and 3, 4 were not working as they should. He stated that he had tried to fix the issue but believed both hot water heaters were just too small for this facility. He stated they still can produce hot water but not for very long. He stated they should have been replaced about a month ago. He stated the hot water does not stay hot in the showers which only gives about 10min of hot water at a time for the resident's showers.</p> <p>During an interview with the DON and Administrator on 4/12/24 at 3:15 PM the staff was asked for the policy for maintenance equipment. The policy was not received prior to exit.</p> |   |  |