STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676355	A. Building B. Wing	05/21/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Brenham Healthcare Center	1303 Hwy 290 E Brenham, TX 77833

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 0835 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	Administer the facility in a manner that enables it to use its resources effectively and efficiently. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interviews, observation and record reviews, the facility failed to use its resources effectively and efficiently to prevent an eviction and facility closure for 1 of 1 facility reviewed for administration.The facility failed to submit a closure plan for 30 of the residents upon receipt of a 30-day eviction notice on 05/08/2026.An IJ was identified on 05/20/2026. The IJ template was provided to the facility on [DATE] at 2:55 PM While the IJ was removed on 05/21/2026 at 4:14 PM, the facility remained out of compliance at a scope of widespread and a severity level of no actual harm with the potential for more than minimal harm that is not immediate jeopardy because of the facility's need to evaluate the effectiveness of their corrective systems.This failure could place residents at risk of improper discharge, worsening medical conditions, injury, hospitalization or death. Findings included:Review of eviction notice, dated 05/08/2026, reflected Tenant owes Landlord approximately $430,000, which is comprised of several components, including property taxes of $50,000-$75,000, back Rent of $425,000 and advanced operating expenses not repaid in the amount of $40,000.Landlord intends to terminate the Lease on July 1, 2026.Review of facility roster, dated 05/19/2026, reflected 30 residents resided in the facility.Review of facility roster, dated 05/21/2026, reflected 24 residents resided in the facility.Review of staff list provided by the ADM, dated 05/19/2026, reflected 6 non-direct care staff were employed with the facility and 11 direct care staff members were working with the facility through an agency staffing company.During an interview on 05/19/2026 at 8:33 AM the ADM stated he was on the [NAME] of closure. He stated at that time the Director of Nursing had resigned and, the previous Administrator resigned. He stated he had talked with some of the other nearby facilities related to discharging residents to their facilities if closure were to happen, but he did not have a specific plan in place. He stated providing food and medical supplies, including medication, was top priority. He stated he had an agreement with an agency to provide staffing for the facility.During an interview on 05/19/2026 at 1:07 PM, Resident #1 stated she was sad to be leaving the facility. She was teary-eyed and crying during the conversation. She stated she had been a resident for 19 years and it was upsetting to move facilities. During an interview on 05/20/2026 at 8:45 AM, the ADM stated he was the only owner of the facility, and he was out of money. He stated the direct care staff were being paid through an agency staffing company. The ADM stated he paid two dietary staff members and one housekeeper at that time. He stated at that time he did not have the funds to pay for a Director of Nursing or a Registered Nurse Supervisor. The ADM stated he had a registered nurse come in at least every other day for several hours to provide registered nurse supervision. He stated he did not have a closure plan at that time, and he intended to file for bankruptcy by 05/22/2026 to prevent the eviction. The ADM stated he had not notified residents or their responsible parties about the eviction, but word has gotten out. He stated he was cut off from on agency staffing company due to non-payment and was working with another agency staffing company to ensure the direct care staff were paid. The ADM stated he did not have a date at which the new agency staffing company would need to be paid by before they stopped sending staff due to non-payment. He stated he was delinquent in payment for supplies and pharmaceuticals. He stated he was still receiving deliveries, and he had not been provided with a cut-off date. The ADM stated closure felt imminent. He stated he (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

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F 0835 Level of Harm - Immediate jeopardy to resident health or safety Residents Affected - Many	thought the landlord would assist more with capital, but the landlord decided to make a deal behind his back regarding the lease and operation of the facility.During an interview on 05/20/2026 at 9:30 AM, LVN A stated she knew closure was coming because there was not any money to pay the staff. She stated she was paid by an agency staffing company, but that would end because the ADM was unable to pay the agency staffing company. She did not state a date when the agency staffing company would no longer be able to provide staff.In an interview on 05/21/2026 at 1:45 PM, records were requested for past due bills owed to suppliers including medical supplies, food suppliers and staffing agencies. The records were not received prior to exit. During an interview on 05/21/2026 at 10:06 AM, Resident #2 stated he was okay with moving facilities since he did not really have a choice. He stated it was stressful to him because he was not familiar with where he would be going. During an observation and interview on 05/21/2026 at 10:10 AM, Resident #3 was crying and upset at having to move facilities. She could not say what was upsetting. During an interview on 05/22/2026 at 1:25 PM with the staffing agent with agency staffing company, he stated the agency staffing company had provided a payment deadline to the ADM on 05/17/2026 but the deadline was extended for another week after the ADM requested more time as the residents would not have received any care. He stated the ADM was $50,000-$60,000 above his credit limit of $30,000. He stated he was aware the ADM was over $100,000 behind in payment to another agency staffing company for providing direct care staff. The staffing agent stated they had planned on pulling the direct care staff on 05/22/2026 or 05/25/2026 so the bill did not continue to be run up.This failure resulted in the identification of an IJ on 05/20/2026 at 2:55 PM. The ADM was notified of the IJ and provided the IJ template on 05/20/2026 at 2:55 PM.The POR was approved on 05/21/2026 at 4:14 PM and reflected the following, Plan of RemovalImmediate JeopardyOn 05/19/2026 an abbreviated survey was initiated at facility. On 05/20/2026 the surveyor provided an Immediate Jeopardy (IJ) Template notification that the Regulatory Services has determined that the condition at the facility constitutes an immediate threat to resident health and safety. The notification of Immediate Jeopardy states as follows: The facility failed to use its resources effectively and efficiently to prevent an eviction and facility closure. The facility failed to submit a closure plan for the current 30 residents upon receipt of a 30 day eviction notice on 05/08/26. Action: Notified Medical Director and all Resident's PCP of facility closure and documented in EHR.Start Date: 5/20/2026Completion Date: 05/20/26Responsible The facility Administrator/designee Action: Placement call has been made to local facilities due to facility closure-Both facilities will visit facility to ensure placement of residents. Will continue to seek placement for all residents until all residents are safely discharged . Start Date: 5/20/2026Completion Date: 05/21/26Responsible: The facility Administrator Action: Notification of Resident Responsible party of Residents Transfer to new facility once transfer has been confirmed by receiving facility and will be documented in the EHR. For residents RP's notification has been made to include the information the facility closure and resident discharge location, Prior to discharge to the new facility all parties are in agreementStart Date: 5/20/2026Completion Date: 05/21/26 Responsible: The facility Administrator or Designee will ensure medication and clinical records are provided to each receiving facility. Start date: 05/20/26Completion Date: 05/21/26 During an observation on 05/21/2026 at 3:00 PM, there were no residents that remained in the facility. All residents had been discharged to other licensed nursing facilities.During an interview on 05/21/2026 at 4:00 PM the ADM stated all residents were confirmed to be discharged from the facility. He stated he will continue to provide any clinical or resident information as needed to the receiving facility. He stated he will notify licensing of the facility closure. He stated the receiving facility notified all RP's of the transfer and discharge to the receiving facility. He stated there were no residents that objected or refused to be transferred to the receiving facilities. While the IJ was removed on 05/21/2026 at 4:14 PM, the facility remained out of compliance at a scope of widespread and a severity level of no actual harm with potential for more than minimal harm that is not immediate jeopardy due to the facility's need to evaluate the effectiveness of their corrective systems.

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F 0845 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Submit a timely, acceptable plan for facility closure, including notification of the appropriate entities and ensuring residents are transferred in a safe and orderly manner. Based on interview and record review, the facility failed to submit to the State Survey Agency, the State LTC ombudsman, residents of the facility, and the legal representatives of such residents or other responsible parties, written notification of an impending closure at least 60 days prior to the date of closure and failed to include in the notice the plan, that has been approved by the State, for the transfer and adequate relocation of the residents of the facility for 28 of 28 residents reviewed for facility closure notices. The facility failed to submit written notification of a closure plan at least 60 days prior to the date of closure and upon receipt of an eviction notice 05/08/2026. The facility failed to submit written notifications to the residents of the facility and the legal representatives of such residents or other responsible parties for 30 of 30 residents reviewed during the facility closure. This failure put residents at risk for an unsafe transfer, psychological harm and anxiety.Findings included: Review of eviction notice, dated 05/08/2026, reflected Tenant owes Landlord approximately $430,000, which is comprised of several components, including property taxes of $50,000-$75,000, back Rent of $425,000 and advanced operating expenses not repaid in the amount of $40,000.Landlord intends to terminate the Lease on July 1, 2026. During an interview on 05/20/2026 at 8:45 AM, the ADM stated he was the only owner of the facility, and he was out of money. He stated the direct care staff were being paid through an agency staffing company. He stated he did not have a closure plan at that time, and he intended to file for bankruptcy by 05/22/2026 to prevent the eviction. The ADM stated he had not notified residents or their responsible parties about the eviction, but word has gotten out. He stated he was cut off from an agency staffing company due to non-payment and is working with another agency staffing company to ensure the direct care staff are paid. The ADM stated he did not have a date at which the new agency staffing company would need to be paid by before they stopped sending staff due to non-payment. He stated he was delinquent in payment for supplies and pharmaceuticals. He stated he was still receiving deliveries, and he had not been provided with a cut-off date. The ADM stated closure felt imminent. He stated he thought the landlord would assist more with capital, but the landlord decided to make a deal behind his back regarding the lease and operation of the facility. He stated he had not notified the medical director, the residents' primary care physician and the residents' responsible parties of the impending closure. He stated he would have the nurses' notify the residents and RP's of the closure and need to discharge to another facility. During an interview on 05/20/26 at 9:00 AM with the Ombudsman Volunteer, she stated the ombudsman office was aware of the facility financial issues and shared the concern about the discharges and facility closure becoming an emergency. She stated the OMBUDSMAN was aware and the Ombudsman Volunteer would be communicating with her any resident concerns. She stated the OMBUDSMAN office had not received any closure plan or notification from the facility that the facility would be closing. During an interview on 05/20/2026 at 9:30 AM, LVN A stated she knew closure was coming because there was not any money to pay the staff. She stated she was paid by an agency staffing company, but that would end because the ADM was unable to pay the agency staffing company. She did not state a date when the agency staffing company would no longer be able to provide staff. During an interview on 05/21/2026 at 11:10 AM the ADM stated the receiving facilities had contacted the RPs of the residents being transferred to their facilities prior to the transfer occurring. He stated RN B was contacting the RPs for the residents being transferred to [FACILITY]. He stated they did not contact the RP's prior to the discharge as the transfers and discharges were happening so quickly. During an interview on 05/22/2026 at 1:25 PM with the staffing agent with agency staffing company, he stated the agency staffing company had provided a payment deadline to the ADM on 05/17/2026 but the deadline was extended for another week after the ADM requested more time as the residents would not have received any care. He stated the ADM was $50,000-$60,000 above his credit limit of $30,000. He stated he was aware the ADM was over (continued on next page)

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F 0845 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	$100,000 behind in payment to another agency staffing company for providing direct care staff. The staffing agent stated they had planned on pulling the direct care staff on 05/22/2026 or 05/25/2026 so the bill did not continue to be run up. During an interview on 05/21/26 at 11:21 AM, Receiving Facility ADM C stated the RP's of the residents transferred to her facility had not been notified of the transfer to her facility due to the facility closure. She stated staff at her facility were able to contact all RP's of the residents and notify them of the transfer to the new facility. During an interview on 05/21/26 at 12:00 PM, the OMBUDSMAN expressed concern that the RP's of residents being transferred to alternate facilities were not being notified prior to the discharge and transfer to the new facility. During an interview on 05/21/26 at 12:40 PM, Receiving Facility ADM D stated the RP for Resident #3 was not notified by the [Closing facility] of the discharge and transfer to the new facility. ADM D stated they notified the RP of the transfer to the new facility and there were no issues. Review of Resident Roster dated 05/20/2026 revealed there were 30 residents who remained at the facility. One residents was discharged to another facility on 05/19/2026. Review of Staff Roster dated 05/20/2026 revealed the following staff at the facility:1 - Administrator3 - Kitchen staff2 - LVN Charge Nurses employed by an outside agency1 - CNA employed by an outside agency1 - House keeping staffReview of facility EHR dated 05/21/26 revealed no notifications documented in the resident's EHR of the facility closure and need for transfer/discharge to a different facility. Facility closure policy was requested to ADM on 05/20/2026 at 9:00 AM and no policy was received.