

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

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 676426	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/23/2026
NAME OF PROVIDER OR SUPPLIER Legend Oaks Healthcare and Rehabilitation - Fort W		STREET ADDRESS, CITY, STATE, ZIP CODE 4240 Golden Triangle Boulevard Keller, TX 76244	
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 0813 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Have a policy regarding use and storage of foods brought to residents by family and other visitors. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure the storage of foods brought to residents by family and other visitors to ensure safe and sanitary storage, handling, and consumption. for 10 Rooms (Rooms 103, 108, 204, 213, 302,303, 305, 403, 408, and 616) of 20 rooms reviewed for safe food storage. The facility failed to monitor resident personal refrigerators in Rooms 103, 108, 204, 213, 302, 303, 305, 403, 408, and 616 to ensure they were clean, sanitary, and the temperature was monitored.This failure could place residents at risk of consuming unsanitary foods. Findings included: Observation on 06/23/26 at 9:25 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no log documenting the daily temperature checks of the refrigerator. Observation on 06/23/26 at 9:35 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and no log posted documenting the daily temperature checks of the refrigerator. Observation and on 06/23/26 at 9:40 A.M., the personal refrigerator located in room [ROOM NUMBER] had a brown fluid spilled in the bottom of the refrigerator, there was no internal thermometer and there was no log posted documenting the daily temperature checks of the refrigerator. Observation on 06/23/26 at 9:48 A.M., the personal refrigerator located in room [ROOM NUMBER] was sitting on the floor of the room, there was a brown liquid spilled on the bottom of the refrigerator and there was no log posted documenting the daily temperature checks of the refrigerator. Observation on 06/23/26 at 9:53 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and there was no log documenting the daily temperature checks of the refrigerator. Observation on 06/23/26 at 9:56 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and the log documenting the daily temperature checks of the refrigerator revealed the last temperature documented was on 03/05/26. Observation on 06/23/26 at 10:00 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and the log documenting the daily temperature checks of the refrigerator revealed the last temperature documented was on 03/05/26. Observation on 06/23/26 at 10:08 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and there was no log documenting the daily temperature checks of the refrigerator. Observation on 06/23/26 at 10:11 A.M., the personal refrigerator for room [ROOM NUMBER] revealed the log documenting the daily temperature checks of the refrigerator revealed the last documented temperature was in December 2025. Observation on 06/23/26 at 10:18 A.M., the personal refrigerator located in room [ROOM NUMBER] revealed there was no internal thermometer and there was no log documenting the daily temperature checks of the refrigerator. In an interview on 06/23/26 at 1:16 PM, CNA-A stated the residents or their family were responsible for keeping resident refrigerators clean. He stated maintenance was responsible for monitoring the temperatures of the refrigerators. In an interview on 06/23/26 at 1:33 PM, the Maintenance Director stated Housekeeping was responsible for checking the residents' refrigerators and keeping them clean. He stated no one had told him about monitoring the refrigerators. In an interview on 06/23/26 at 1:41 PM, CNA-B stated they thought maintenance was responsible for checking the refrigerator temperatures in the residents' rooms. They thought dietary was supposed to check the food in the refrigerators. In an (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: 676426	Facility ID: 676426 If continuation sheet Page 1 of 2

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F 0813 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	interview on 06/23/26 at 1:47 PM, CNA-C stated they thought housekeeping was responsible for keeping the resident refrigerators clean, but they did not know who checked the temperatures. In an interview on 06/23/26 at 1:58 PM, CNA-D stated they thought housekeeping was responsible for cleaning the residents' refrigerators when they cleaned the rooms, but she was not sure. In an interview on 06/23/26 at 2:23 PM, LVN-E stated they were unsure who was responsible for cleaning the resident refrigerators. They stated possibly housekeeping cleaned them when they cleaned the rooms. They stated if the resident had spoiled food in the refrigerator, it could cause them to become sick. In an interview on 06/23/26 at 2:45 PM, RN-F stated the nurses usually checked the temperatures on the refrigerators in the resident rooms, and logging the temperature. Temperatures were usually checked by the night shift. She stated food had to be monitored to ensure there was no spoilage. In an interview on 06/23/26 at 2:56 PM, RN-G stated the nursing staff was responsible for checking the refrigerators in the resident rooms, usually done on night shift. They stated if residents were to eat spoiled food, they could become sick. In an interview on 06/23/26 at 3:05 PM, the ADON stated previously housekeeping and maintenance were responsible for the residents' refrigerators. Maintenance monitored the temperatures and housekeeping kept them clean, but somewhere along the way the process stopped. She stated the nursing staff should be checking any food that comes out of the refrigerators was not spoiled before the residents consumed it, to prevent the residents from getting sick. She did not know if staff were formally trained on the process or if it was just something passed on during on-the-job training. Record review of the facility's policy titled, Resident Personal Food Storage, dated April 2025, reflected: Food or beverage brought in from outside sources for storage in facility pantries, refrigeration units, or personal/resident room refrigeration units will be monitored by designated facility staff for food safety .4. Refrigerator units will have internal thermometers to monitor for safe food storage temperatures.5. Staff will monitor and document unit refrigerator temperatures.		