STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	745059	A. Building B. Wing	04/07/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
St. Joseph's Care Center	609 Johnson Drive McGregor, TX 76657

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 - Few	Keep residents' personal and medical records private and confidential. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interviews and record review, the facility failed to respect the residents' right to personal privacy, including the right to send and promptly receive unopened mail and other letters, packages and other materials delivered to the facility for the residents, including those delivered through a means other than a postal service, for 1 resident (Res1) of 4 residents interviewed.The facility failed to respect Res1's right to privacy by opening his mail without his permission.This failure could result in Res1 losing trust in staff and feeling disrespected and violated.Findings include: Record review of Res #1's face sheet dated 09/17/2025 revealed a [AGE] year-old male was admitted on *with the following diagnoses:Quadriplegia, C1 - C4 complete (paralysis affecting all 4 limbs in the highest cervical spinal cord injury (no signals can pass though the arms, legs, trunk, or diaphragm), anxiety disorder (mental health condition characterized by excessive, uncontrollable worry about everyday issues, affecting daily functioning and quality of life), unspecified and depression. Record review of Res#1's MDS revealed his BIMS was 14. Record review of the grievances filed in February 2026 revealed that AADMN wrote grievance on Res #1's behalf on 02/26/2026 stating that staff opened his mail without his permission. Interview with Res #1 on 04/07/2026 at 10:29 a.m. revealed he stated that LVNA opened his mail without his permission. Res #1 said RN walked in his room to give him his mail. Res #1 said RN told him that she opened his mail because she thought there was medication in it. Res #1 said he told her that was not a reason to open his mail without asking first. He concluded that he felt LVNA disrespected him. Interview with ADMN on 04/07/2026 at 4:01 p.m. revealed the AADMN issued a verbal warning to the LVNA regarding opening Res #1's mail without his permission. ADM said this was a violation of the resident rights policy. She stated this could cause Res #1 to not trust the facility with essential information. Interview with LVNA on 04/07/2026 at 4:09 p.m. revealed she stated she opened Res #1's mail because someone told her when she was first hired to open residents' mail to ensure there was no medication in there. LVNA stated she told Res #1 she opened his mail and apologized to him. LVNA stated that AADM told her she was not supposed to open residents' mail unless she opened it in front of them with their permission. LVNA advised Res #1 did not give her permission to open his mail. LVNA concluded that she received a verbal warning from AADMN, who also reviewed the resident rights policy with her. She stated that opening residents' mail without their permission could cause the residents to not trust the staff and could also make them upset. Interview with AADMN on 04/07/2026 at 4:23 p.m. revealed she wrote a grievance on behalf of Res #1 about his mail being opened without his permission. AADMN said she issued LVNA a verbal warning and advised that staff can not open residents' mail without their permission. AADMN advised that opening a resident's mail without permission could cause them to lose trust in the facility staff.Record review of the facility's resident rights policy (undated) stated the following: Purpose:To ensure that resident rights are respected and protected.To inform residents of their rights and provide an environment in which they can be exercised.To personal privacy, including the right to privacy in oral, written, and electronic communications, including the right to send and receive unopened mail and other letters, packages and other materials delivered to the facility for the resident, including those delivered through a means other than postal service

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