STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	745060	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
St. Juanita Retirement and Rehab	3215 Ymca Drive San Angelo, TX 76904

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 0729 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Verify that a nurse aide has been trained; and if they haven't worked as a nurse aide for 2 years, receive retraining. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure it received registry verification that the individual met competency for 1 (CNA C) of 3 employees reviewed for registry verification. The facility failed to ensure CNA C had a current nurse aide certification prior to providing care for residents. This failure could place residents at risk for being provided with care by staff who have not provided documentation of training and competency in providing care. Findings included: A record review on [DATE] of CNA C's personnel file revealed a date of hire of [DATE]. The last Employability Status Check Search was completed on [DATE] reflected CNA C's NAR status expired [DATE]. A record review on [DATE] of Employe Time Clock details, dated [DATE], revealed CNA C clocked in and worked 6:00 p.m. - 6:00 a.m. on [DATE], [DATE], [DATE], [DATE], [DATE], [DATE], [DATE], [DATE],[DATE], [DATE],[DATE], [DATE], [DATE], and [DATE]. During an interview on [DATE] at 1:45 p.m., CNA C stated t she was aware that her NAR status had expired. CNA C stated she was aware that it was her responsibility to renew it through TULIP. CNA C stated she told the HR Coordinator it was expired and she needed help to renew it because she did not know how and the HR Coordinator told her he was busy and could not help her. During an interview on [DATE] at 2:12 p.m., the HR Coordinator stated he was not aware CNA C's NAR status was expired, but he knew it was getting close to expiring because she had come by a couple of times for him to help her and they kept missing each other. The HR Manager stated CNA C's certificate in the NAR was expired. The HR Manager said CNA C was instructed that she would have to renew her NAR status through TULIP herself but that he would help her. The HR Coordinator stated it was his responsibility to ensure that EMR/NAR checks were conducted annually to ensure all staff working had updated certifications. The HR Manager stated that it was the staff's responsibility to keep their own certifications current. The HR Coordinator said that if staff did not keep their certifications updated, it could lead to increased falls, accidents, abuse allegations, and infection control issues. During an interview on [DATE] at 2:30 p.m., the DON stated t it was the HR Coordinators' responsibility to ensure that the EMR/NAR checks were conducted annually for all CNAs and medication aides. The DON stated no one monitored this system to ensure that all certified nurse aides' and medication aides' certifications were active. The DON said that if certified nurses aides' and medication aides' certifications were not active, it could lead to incorrect procedures. During an interview on [DATE] at 2:52 p.m., the Corporate Quality Assurance Nurse stated that EMR/NAR were supposed to be checked by the HR Coordinator annually and upon hire. The Corporate Quality Assurance Nurse said that it was the Administrator's responsibility to monitor the process but right now they did not have an Administrator. The Corporate Quality Assurance Nurse also stated that there was potential for harm to a resident when no EMR/NAR checks are completed on hire or annually. Record review of the facility's policy, undated, titled, Credential Verification During Hiring and Employment, reflected the following: PolicyAll applicants and employees must have current and valid credentials required for their position before beginning work and throughout their employment with the facility. The Human Resources Department is responsible for verifying and maintaining documentation of all required credentials, licenses, (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 0729 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	certifications, and exclusion checks in employee personnel files.Ongoing Monitoring:Facility HR must:Complete yearly EMR exclusion checks for all employees.Maintain updated copies of all renewed credentials in personnel files.Non-Compliance:Employees with expired licenses, certifications, or failed exclusion checks:Must be removed from the work schedule.May not return to work until compliant documentation is received and verified.

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0732 Level of Harm - Potential for minimal harm Residents Affected - Many	Post nurse staffing information every day. Based on observation, interview, and record review, the facility failed to post the daily nurse staffing information with the current date, resident census, and the total number of staff and actual hours worked at the beginning of each shift for 1 of 1 facility reviewed for nurse staffing. The facility failed to update and post the daily nurse staffing information from 5/10/2026-5/26/2026. This failure could place residents at risk of not having access to information regarding the numbers of staff caring for the residents each shift and the facility census.Findings included: During an observation and interview on 05/26/2026 at 11:32 A.M., the daily staffing posting was not hanging at the nurse's station, only an assignment sheet for staffing. The Corporate Quality Assurance Nurse said the daily staffing was completed by the DON. The Corporate Quality Assurance Nurse stated the new DON just started on Monday 5/25/2026 and they were changing the way the daily staffing was completed. She said the daily staffing posting should be completed daily so that everyone knew how much staff were supposed to be in the facility to care for the residents. During an interview on 05/26/2026 at 11:42 A.M., the DON said the night shift nurses completed the daily staffing posting. The DON said she would be responsible for ensuring the daily staffing was posted. The DON said the daily staffing should be posted to keep up with the number of staff in the building. During an interview on 05/26/2026 at 11:44 A.M., the Corporate Quality Assurance Nurse said they changed the person responsible for staffing and the nurse taking over the staffing position would be responsible for completing the daily staffing. She stated she would start in-services and education regarding the changes. The Corporate Quality Assurance Nurse said she presumed it was not completed since 05/9/2026 because they had just hired a new DON on 5/25/2026. Record review of the facility's policy titled, Direct Care Daily Staffing Numbers, dated July 2016, indicated, Our facility will post on a daily basis for each shift, the number of nursing personnel responsible for providing direct care to residents.