Avir at San Antonio

Report ID: CCN 455713
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§ 1 Facility Identity

Facility	Avir at San Antonio
CCN	455713
Location	50 Briggs Ave., San Antonio, TX, 78224
Ownership type	For profit - Corporation
Certified beds	119

§ 2 CMS Federal Record

Civil money penalties on file	$39,971
Deficiency citations — current cycle	19 (6% vs prior 24 months (18))
Deficiency citations — prior 24 months	18
Immediate Jeopardy — current cycle	**1**
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$39,971
TX state average	$49,788 (this facility is 0.8× the TX average)
National average	$31,239 (this facility is 1.3× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 19 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**K · Immediate Jeopardy**	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	G	Complaint
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	E	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	E	Standard survey
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	E	Standard survey
F773	Provide or obtain laboratory tests/services when ordered and promptly tell the ordering practitioner of the results.	E	Standard survey
F814	Dispose of garbage and refuse properly.	E	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of	D	Standard survey

	being admitted		
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	C	Standard survey
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	C	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: SUMMIT LTC (5 facilities)
Ownership chain	SUMMIT LTC (5 facilities)
Penalties vs chain average	$39,971 vs $69,347 (0.6× the chain average)
Current deficiencies vs chain average	19 vs 16.2 (1.2× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.7 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	1 / 5 (state avg 3.8 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/455713
Snapshot SHA-256	7cd70270ddf547dfa555a164fde512b41f4157754399e96964b05fa01c468bb1
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 455713.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 7cd70270ddf5.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at https://www.caregiverhelpnow.com/methodology; the Snapshot SHA-256 above pins this record to that methodology version.

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