

St. Joseph Manor

Report ID: CCN 675887
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§ 1 Facility Identity

Facility	St. Joseph Manor
CCN	675887
Location	2333 Manor Dr, Bryan, TX, 77802
Ownership type	Government - Hospital district
Certified beds	81

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	25 (1150% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	2
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$0
TX state average	\$49,788 (this facility is 0.0× the TX average)
National average	\$31,239 (this facility is 0.0× 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 25 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
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	K · Immediate Jeopardy	Complaint
F770	Provide timely, quality laboratory services/tests to meet the needs of residents.	K · Immediate Jeopardy	Complaint
F732	Post nurse staffing information every day.	F	Complaint
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	E	Complaint
F760	Ensure that residents are free from significant medication errors.	E	Complaint
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Complaint
F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	E	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F602	Protect each resident from the wrongful use of the resident's belongings or money.	D	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint
F694	Provide for the safe, appropriate administration of IV fluids for a resident when needed.	D	Complaint

F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F636	Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.	D	Standard survey
F676	Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: GULF COAST LTC PARTNERS (19 facilities); Owner on file: BURLESON COUNTY HOSPITAL DISTRICT (organization)
Ownership chain	GULF COAST LTC PARTNERS (19 facilities)
Penalties vs chain average	\$0 vs \$21,178 (0.0× the chain average)
Current deficiencies vs chain average	25 vs 9.1 (2.7× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.7 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	4 / 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/675887
Snapshot SHA-256	3678774c98709a745762cb4843385f501fbdb8f1a7b382f3946e4335a5b1a94d
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 675887.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 3678774c9870.
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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