

River Bend Healthcare

Report ID: CCN 676274
Generated: 2026-07-23T13:39:56.742Z

§ 1 Facility Identity

Facility	River Bend Healthcare
CCN	676274
Location	1339 EASTWOOD DR, SEGUIN, TX, 78155
Ownership type	Government - Hospital district
Certified beds	115

§ 2 CMS Federal Record

Civil money penalties on file	\$18,089
Deficiency citations — current cycle	18 (1700% vs prior 24 months (1))
Deficiency citations — prior 24 months	1
Immediate Jeopardy — current cycle	0
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	\$18,089
TX state average	\$49,788 (this facility is 0.4× the TX average)
National average	\$31,239 (this facility is 0.6× 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 18 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
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	G	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
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
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	E	Standard survey
F805	Ensure each resident receives and the facility provides food prepared in a form designed to meet individual needs.	E	Standard survey
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	E	Standard survey
F946	Provide training in compliance and ethics.	E	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	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	Complaint
F641	Ensure each resident receives an accurate assessment.	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
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	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
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F558	Reasonably accommodate the needs and preferences of each resident.	D	Complaint

§ 5 Ownership

Ownership record	Ownership type: Government - Hospital district
------------------	--

§ 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)	3 / 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/676274
Snapshot SHA-256	0e94c410f07610d398c5948d94c2a4948f8a28476aaec62138e23acca32bdf2e
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 676274.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 0e94c410f076.
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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.