

West Rest Haven

Report ID: CCN 676386
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§ 1 Facility Identity

Facility	West Rest Haven
CCN	676386
Location	503 Meadow Drive, West, TX, 76691
Ownership type	For profit - Corporation
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	\$14,069
Deficiency citations — current cycle	20 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	3
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	\$14,069
TX state average	\$49,788 (this facility is 0.3× the TX average)
National average	\$31,239 (this facility is 0.5× 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 20 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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	K · Immediate Jeopardy	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	K · Immediate Jeopardy	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J · Immediate Jeopardy	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	G	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	E	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	E	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.	E	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	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
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.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey

F640	Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	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	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
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F813	Have a policy regarding use and storage of foods brought to residents by family and other visitors.	D	Standard survey
F881	Implement a program that monitors antibiotic use.	D	Standard survey

§ 5 Ownership

Ownership record	Owner on file: SOUTH LIMESTONE HOSPITAL DISTRICT (organization)
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§ 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)	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/676386
Snapshot SHA-256	1e7f0bf158aa0cd60d7af6a5c5905b10eb4e29daff89b3816c9afe48fca2ad29
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 676386.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 1e7f0bf158aa.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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