

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
CORPUS CHRISTI DIVISION

IN RE: §
§
SQLC SENIOR LIVING CENTER AT § CASE NO. 19-20063
CORPUS CHRISTI, INC. D/B/A §
MIRADOR, § CHAPTER 11
§
DEBTOR.

**DECLARATION OF DEBORAH NUGENT REGARDING STATUS OF PATIENT
CARE**

Pursuant to 28 U.S.C. § 1746, Deborah Nugent declares as follows:

I, Deborah Nugent, being duly sworn, declare the following under penalty of perjury:

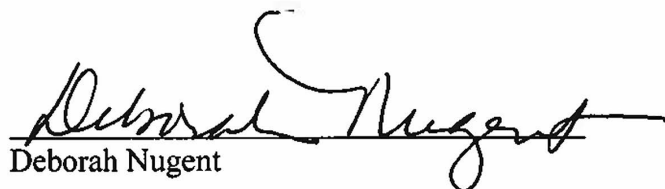
This declaration is offered in lieu of the appointment of a Patient Care Ombudsman in this case and pursuant to the Court's order dated February 26, 2019 [Dkt. No. 115].

1. I am over 18 years of age, of sound mind, and competent to make this Declaration.
2. The facts stated in this Declaration are within my personal knowledge and are true and correct and cover the period from March 27, 2019 to April 15, 2019 (the "reporting period").
3. I serve as the Executive Director for SQLC Senior Living Center at Corpus Christi, Inc., d/b/a/ Mirador and I have held that position since July 7, 2017. In that capacity, I state the following:
 - a. Changes in resident census (separately noting any changes in census of Assisted Living Residences; Memory Care Residences and Skilled Nursing Residences):
 - a. As of 4/11/2019:
 - i. Independent Living was 91;
 - ii. Skilled Nursing was 40;
 - iii. Assisted Living was 40; and
 - iv. Memory Support was 16.
 - b. As of 3/31/2019:
 - i. Independent Living was 91;
 - ii. Skilled Nursing was 39;

- iii. Assisted Living was 37; and
- iv. Memory Support was 16.
- c. Changes and fluctuations to census are within historical parameters.
- b. Changes in staffing, including any reason for the reduction or increase in staff and the tenure and position of any departing staff member:
 - a. Mirador total staffing as of 4/11/19 was 178.
 - b. Mirador total staffing as of 3/31/19 was 178.
 - c. Changes and fluctuations to staffing are within historical parameters.
- c. List of any complaints received by Debtor regarding patient care:
 - a. None to report.
- d. Changes in critical vendors or any curtailment in supply by any critical vendors at the Facility:
 - a. None to report.
- e. List of any complaints asserted by any vendor related to failure time timely pay post-petition invoices:
 - a. None to report.
- f. List of any communications from Medicare and/or Medicaid and all related fiscal intermediaries advising as to any overpayments aggregating in excess of \$10,000.00:
 - a. None to report.
- g. Number of deaths during the reporting period:
 - a. None.
- h. Other:
 - a. N/A

I have reviewed this Declaration and hereby declare under penalty of perjury that the foregoing is true and correct and within my own personal knowledge.

Executed this 14th day of April 2019.


Deborah Nugent

Executive Director