

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 10/09/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055208	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2026
NAME OF PROVIDER OR SUPPLIER Seaview Rehabilitation & Wellness Center, LP		STREET ADDRESS, CITY, STATE, ZIP CODE 6400 Purdue Drive Eureka, CA 95503	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0557 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to be treated with respect and dignity and to retain and use personal possessions. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure one of four sampled residents (Resident 1) was treated with dignity and respect during the provision of incontinent care when Certified Nursing Assistant A (CNA A) interacted with Resident 1 in a rude and disrespectful manner, causing Resident 1 to repeatedly call for help and request that CNA A be removed from the room. This finding had the potential to result in diminished dignity, trust, and emotional well-being for Resident 1 during personal care, as well as increased anxiety, reluctance to seek assistance, and a negative perception of the facility's caregiving environment. A review of the admission Record (Face Sheet) indicated Resident 1 was admitted to the facility on [DATE] with diagnoses including left hemiplegia (paralysis [inability to move] one side of the body) following cerebral infarction (the death of brain tissue caused by a blocked blood vessel), vascular dementia (a decline in thinking skills caused by conditions that block or reduce blood flow to the brain, leading to problems with memory, planning, and judgment), and anxiety disorder (mental health condition involving excessive, persistent fear, worry, and physical symptoms that interfere with daily life). A review of the Minimum Data Set (MDS), dated 06/2026, indicated Resident 1's Brief Interview for Mental Status (BIMS) score was 14. Section E documented no hallucinations, delusions, psychosis, rejection of care, wandering, or behavioral symptoms directed toward others. During an interview conducted on 7/21/26, Resident 1 stated CNA A was rude while providing incontinent care and attempted to turn her onto her left side after she repeatedly stated she could not tolerate that position. Resident 1 stated she repeatedly called for help and requested CNA A be removed from the room. Resident 1 stated another CNA entered the room, CNA A left the room, and the resident's care was completed. Resident 1 stated she did not want CNA A to provide her care again. During an interview conducted on 7/22/26 at 10:15 a.m., CNA B stated he heard Resident 1 repeatedly calling for help and calling for Licensed Nurse B. CNA B stated he entered the room and heard Resident 1 state, Get this woman off of me and describe CNA A as rude and mean. CNA B stated he completed Resident 1's incontinent care after CNA A left the room. During an interview conducted on 7/22/26 at 10:30 a.m., Licensed Nurse B stated Resident 1 had been at her normal baseline prior to the incident. Licensed Nurse B stated Resident 1 later reported CNA A had been rough during incontinent care. During an interview conducted on 7/22/26 at 10:38 a.m., the Social Services Director stated Resident 1 normally communicated her needs appropriately and did not typically make complaints regarding staff. A review of the Situation, Background, Assessment, Recommendation (SBAR), dated 7/06/26 at 3 p.m., indicated Resident 1 reported CNA A had been rough while providing incontinent care. A review of the facility policy titled, Resident Rights, revised 1/01/12, indicated residents have the right to be treated with kindness, respect, and dignity and have the right to make choices regarding their care and daily routines. A review of the facility policy titled, (continued on next page)		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F 0557 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Dressing the Resident, revised 1/01/12, indicated staff were to introduce themselves, explain the procedure before providing care, address the resident by name, encourage resident participation, observe resident tolerance, provide reassurance, and promote resident dignity and self-esteem throughout personal care. A review of the facility policy titled Resident Rights - Quality of Life, revised March 2017, indicated residents were to receive care that promoted dignity, individuality, respect, and quality of life. The policy further indicated staff were expected to communicate respectfully, explain care before providing services, encourage resident participation, and provide person-centered care consistent with resident preferences.		