STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055435	A. Building B. Wing	11/25/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
The Villas at Saratoga Skilled Nsg & Assisted Lvg	20400 Saratoga-Los Gatos Rd Saratoga, CA 95070

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. Based on observation, interview, and record review, the facility failed to ensure to provide resident's room free from sound for one of three sampled resident (Resident 1). This failure had the potential to affect Resident 1's health and well-being. Findings:During telephone interview with Resident 1's significant family member (SFM) on 10/21/2025 at 1:09 pm., SFM stated noise from metal plate from facility's drive way making Resident 1 not having quiet time in the room. SFM also stated every time people step on or cars passing by on metal plate, making sound, can hear from Resident 1's room.During an observation on 10/22/025 at 10:52 a.m., noted metal plate located on driveway, outside, near Resident 1's room, made sound metal plate moved when stepped on. Also heard the sound when car passed on this metal plate after few minutes later.During an observation on 10/22/2025 at 10:55 a.m., noted another metal plate located near the end of drive way where delivery trucks parking to unload, made sound when stepped on the plate.During concurrent observation and interview with facility's maintenance supervisor (MS) on 10/22/025 at 10:58 a.m., MS verified both metal plates and confirmed both plates were made sounds when stepped on and cars passing by. MS stated metal plates making sounds due to plates were not fitted tight to the ground. MS stated drive way metal plate, covering facility's emergency water supply source, unable to bolt the plate to ground to have access to shut off water during an emergency as needed. MS also stated will fix this metal plate with foam or some other material to prevent sound. MS further stated second metal plate covering electrical wiring, belongs to electrical supply company. MS stated he will reach out to them to fix the loose bolt for this metal plate. MS stated sound from metal plates had the potential for lack of quiet place for resident in room near to this area. Review of facility's policy and procedure (P&P) titled, Homelike Environment, revised February 2021, the P&P indicated, The facility staff and management maximize, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include: comfortable sound levels.

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0689 Level of Harm - Actual harm Residents Affected - Few	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents. (continued on next page)

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0689 Level of Harm - Actual harm Residents Affected - Few	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure to provide moderate assistance (helper does less than half the effort) for bed mobility, transfer, ambulation, maximum assistance (helper does more than half the effort) for toileting hygiene (process of using commode for urination and bowel movement), and failed to document comprehensive risk for fall care plan with person centered interventions for staff's assistance for bed mobility, transfer, ambulation, toileting and hygiene to prevent a fall for one of three sampled resident (Resident 2). Above these failures were resulted in an unwitnessed fall with right femur neck ((part of the largest, and strongest thigh bone that connects the ball shaped head of the femur to the rest of the bone, critical structural component of the hip joint) fracture (broken bone) and underwent surgery (a medical procedure, often involving cutting into the body) to fix the fracture for Resident 2.Findings:Review of Resident 2's face sheet (a document that gives resident's information at a quick glance) indicated Resident 2 was admitted to facility on 8/25/2025. Resident 2's admission diagnoses included diabetes type 2 (a chronic condition that affects the way the body processes blood sugar), open wound (a break or injury in the skin) to right foot, lack of coordination (a condition that affects the body's ability to control and execute smooth and precise movements), muscle weakness (a condition where muscles lose their strength), congestive heart failure (a chronic condition where heart muscles weakened, difficult for the heart to pump blood effectively throughout the body), peripheral vascular disease (a condition that affects blood vessels, typically in the legs), and depression (a serious mental condition with persistent feelings of sadness, hopelessness, and loss of interest in daily activities).Review of Resident 2's minimum data set (MDS: clinical and functional assessment tool) assessment dated [DATE], section C for brief interview for mental status (BIMS) indicated, score of 4/15 (score of 0-7: severely impaired cognition, 8-12: moderately impaired cognition, 13-15: intact cognition), severely impaired cognition.Review of Resident 2's MDS assessment dated [DATE] for functional limitation in range of motion (ROM: full movement capability of a joint or series of joints) assessment indicated, impairments on both sides of lower extremities (legs), required moderate assistance for lying to sitting on side of bed, sit to stand, chair to bed-to chair transfer, toilet transfer, and walk 10 feet, and maximum assistance for toileting hygiene needs.Review of Resident 2's history and physical notes dated 8/25/2025, documented by Resident 2's primary care physician (PCP: a healthcare professional who serves as point of contact for general medical needs and routine check-ups) indicated, does not have capacity to make medical decisions. Reason-cognitive impairment.Review of Resident 2's morse fall scale (a common healthcare tool used to quickly assess a resident's risk for fall) assessment dated [DATE], indicated, moderate risk for fall.Review of Resident 2's bowel and bladder program screener, dated 8/25/2025, indicated, continent of bowel and bladder with 1 person assistance with get to bathroom, transfer to toilet/commode/urinal, and adjust clothing and cleaning.Review of Resident 2's physical therapy (PT: a healthcare specialty that focuses on restoring, maintaining, and improving physical function) notes dated from 8/26/2025 to 9/24/2025, musculoskeletal system assessment indicated, impaired left lower extremity strength, hip, knee and ankle. Functional mobility assessment indicated, Resident 2 needed moderate assistance with transfers and ambulation. This notes also indicated, Resident 2 required fall risk precautions. Review of Resident 2's occupational therapy (OT: a healthcare profession that aims to improve ability to participate in activities of daily living [ADL]) notes dated from 8/26/2025 to 9/24/2025, indicated, poor standing balance, impaired safety awareness, impaired short-term memory (information only held for a brief period, generally 15 5o 30 seconds before it begins to fade away) and risk for fall. This notes was also indicated Resident 2 needed moderate assistance with toileting, transfer to commode, and personal hygiene. Review of Resident 2's speech therapy (ST: a healthcare profession that focuses on improving and restoring cognitive communication) notes, dated from 8/26/2025 to 9/24/2025, indicated, Resident 2 was oriented to person only and impaired insight (awareness of a problem or situation).Review of Resident 2's change of condition (COC: a significant change from baseline health, function or mental status, that requires interventions to address) dated 10/2/2025, indicated, around 10 p.m., nursing staff heard a thud (sound that made when something heavy falls or hits something else) and found Resident 2 lying on floor next to left side of his bed, unwitnessed fall.Review of Resident 2's nursing post fall evaluation notes dated 10/2/2025, indicated, fall was occurred in the Resident 2's room and fall was not witnessed. This notes was also indicated Resident 2 was attempting to use toilet by himself at the time of the fall.Review of Resident 2's

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure medications (chemicals or compounds used to cure, halt, or prevent diseases or illnesses) left unattended in resident's room for one of three sampled resident (Resident 1)'s room. This failure had the potential for residents to have an unsafe access to medications. Findings: During an observation on 10/22/2025 at 11:08 a.m., noted 4 purple color capsules, 5 clear yellow color capsules, 1 pink color tablet and 1 white color tablet inside in a small clear plastic medication cup (used to carry medications to take to resident's room to administer), clear thick liquid 10 milliliter (ml: volume of liquid, equal to one thousandth of one liter) in another medication cup, and glass of water on a tray table next to Resident 1's bed while Resident 1 in bed. No license staff presence in Resident 1' room. Review of Resident's face sheet (FS: a document that gives resident's information at a quick glance) indicated Resident 1 was admitted to facility on 8/19/2025. FS also indicated Resident 1's diagnoses included atrial fibrillation (irregular and rapid hear beat), anemia (not enough healthy red blood cells), and immunodeficiency (weak immune system, making it difficult to fight off infections).Review of Resident 1's minimum data set (assessment tool) assessment dated [DATE] indicated Resident1's brief interview for mental status (BIMS) indicated Resident 1's BIMS score of 5 out of 15 (score of 0-7: severely impaired cognition, 8-12: moderately impaired cognition, 13-15: intact cognition).Review of Resident 1's order summary report indicated an order for medication Zyflamend herbal pain relief (a herbal supplement to support a healthy joint and mobility function) 4 capsules three times a day, dated 9/27/2025, Apixaban (used to prevent and treat blood clots) 5 milligram (mg: unit of mass/weight equal to a thousandth of a gram) two times a day, dated 8/19/2025, cod liver oil (a supplement derived from the cod fish, used to relieve joint pain) 10 ml two times a day, dated 9/9/2025, fish oil (a supplement widely used for heart health) 5 capsules, three times a day, dated 10/4/2025, progesterone (used for hormone replacement) 100 mg capsule once a day, dated 8/19/2025.During an interview with license vocational nurse A (LVN A) on 10/22/2025 at 11:12 a.m., LVN A confirmed Zyflamend, fish oil capsules, Apixaban, progesterone tablets and cod liver oil liquid in medication cups in Resident 1's room. LVN A was also confirmed these medications were ordered by medical doctor (MD) for Resident 1. LVN A stated she prepared and left medications in cups in Resident 1's room. LVN A also stated Resident 1 would take the medications when her son comes to visit. LVN A also stated medications should have been kept in a locked compartment till administer to residents. LVN further stated medications should not have left in Resident 1's room without presence of license staff.During an interview with facility's director of nursing (DON) on 10/22/2025 at 11:23 a.m., DON stated medications should not be in resident's room without license staff presence. During an interview with facility's consultant pharmacist (CP) on 10/22/2025 at 11:27 a.m., PC all medications should have been in a locked area, license staff should not have left medications unattended in resident's room for safety and security.Review of facility's policy and procedure (P&P) titled, Storage of Medications, revised November 2020, the P&P indicated, Drugs and biologicals used in the facility are stored in locked compartments. Only persons authorized to prepared and administer medications have access to locked medications.