

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055917	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/03/2025
NAME OF PROVIDER OR SUPPLIER Harvest Crossing Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 469 East North Street Manteca, CA 95336	

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. (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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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to provide a safe and comfortable homelike environment to three of five sampled residents (Resident 1, Resident 2, and Resident 3) when: Resident 2 stated she did not feel safe at the facility after an altercation with Resident 4; and Resident 1 and Resident 3 stated they were both scared of Resident 4. These failures removed Resident 1, Resident 2 and Resident 3's right to a dignified homelike environment, with the potential to result in psychosocial harm. Findings: A review of Resident 1's admission RECORD indicated, Resident 1 was admitted to the facility with diagnoses which included muscle weakness and major depressive disorder (a serious mental illness characterized by persistent sadness, loss of interest in activities, and other symptoms that significantly interfere with daily life). A review of Resident 2's admission RECORD indicated, Resident 2 was admitted to the facility with diagnoses which included anxiety disorder (a group of mental health conditions characterized by excessive, persistent fear and worry that can significantly interfere with daily life, and bipolar disorder (a mental health condition that causes extreme shifts in mood, energy, and activity levels). A review of Resident 3's admission RECORD indicated, Resident 3 was admitted to the facility with diagnoses which included quadriplegia (a severe medical condition characterized by the partial or total loss of function in all four limbs and the torso), muscle weakness, and major depressive disorder. A review of Resident 4's admission RECORD indicated, Resident 4 was admitted to the facility with diagnoses which included unspecified dementia (A condition in which a person loses the ability to think, remember, learn, make decisions, and solve problems), and major depressive disorder. During an interview on 7/3/25, at 8:47 a.m., Resident 1 stated .Ya, [Resident 4] hit my face .It hurt .I am scared of [Resident 4] . During an interview on 7/3/25, at 9 a.m., Resident 2 stated .I don't feel safe here . [Resident 4] scratch me on my right arm . [Resident 4] was always yelling .I cried when [Resident 4] scratched me . During an interview on 7/3/25, at 9:22 a.m., Resident 3 stated . [Resident 4] came back from the bathroom and told me to get out of my bed, and [Resident 4] started hitting me on my left arm .I yelled for help .I felt scared that [Resident 4] might do it again . [Resident 4] would get mad. [Resident 4] would yell . During an interview on 7/3/25, at 9:56 a.m., Certified Nurse Assistant (CNA) 1 stated, Resident 4 had cussed (to use offensive words when speaking), and slapped staff, and residents before. CNA 1 further stated Resident 4 used to go to other residents unannounced, and Resident 4 was aggressive (a quality of anger and determination that makes someone attack other people) to other residents. During an interview on 7/3/25, at 10:09 p.m., Licensed Nurse (LN) 1 stated Resident 4 had walked by Resident 1 and called Resident 1 a (derogatory term; a word or grammatical form expressing a negative or disrespectful connotation, a low opinion, or a lack of respect toward someone or something). LN 1 stated Resident 1 did not provoke Resident 4. LN 1 stated Resident 1 was very nice and it was not safe for Resident 1 to be called a [derogatory term]. During an interview on 7/3/25, at 10:49 a.m., CNA 3 stated Resident 4 had yelled at CNA 3 when CNA 3 provided one-to-one care (a personalized caregiving approach where a dedicated caregiver provides focused attention and support to a single individual) to Resident 4. During an interview on 7/3/25, at 11:02 a.m., the Director of Nursing (DON) stated Resident 4 was placed on one-to-one care after the third resident to resident incident. The DON stated after the first incident facility staff made sure Resident 4 did not go near Resident 1. The DON stated if Resident 4 was not put on one-to-one care, Resident 4 could have struck other residents. The DON further stated resident to resident altercation were not ok for Resident 1, Resident 2, and Resident 3 because of safety. The DON stated something could have happened to Resident 1, Resident 2 and Resident 3. The DON stated the residents might not have felt safe when another resident scratched them. The DON stated the facility was home to the residents and residents should have felt safe in their home-like environment. Review of Resident 1's Care Plan, initiated on 1/9/25, the record indicated, .Interventions: .Assure/encourage homelike environment to aid in emotional contentment .Review of Resident 1's Progress Note, dated 1/22/25 at 3:39 p.m., the record indicated, . [Resident 1] alleged that another female resident scratched [Resident 1's] face, upon skin assessment [Resident 1] does have a scratch mark and discoloration to her left cheek bone .Review of Resident 1's Progress Note, dated 1/23/25 at 1:52 p.m., the record indicated, . [Resident 1] stated I got scratched . [Resident 1] had scratches on her face .Review of Resident 1's Progress Note, dated 1/24/25 at 4:36 p.m., the record indicated, . I'm scared of the lady .Review of Resident 1's Progress Note, dated 1/27/25 at 3:55 p.m., the record indicated, . The lady, the lady scratched my leg. The lady, the lady hit me and</p>		