STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055987	A. Building B. Wing	04/10/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Broadway Villa Post Acute	1250 Broadway Sonoma, CA 95476

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 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public. Based on observation, interview and record review, the facility failed to provide a safe and sanitary environment, affecting all residents who receive food from the kitchen, when there were gouged, cracked and broken tiles on the floors of the kitchen and dry goods storage room (storing shelf-stable food and ingredients like flour, grains, canned goods, and spices).These failures prevented thorough cleaning of the floor, creating an environment for bacteria (tiny, single-celled living organisms often called germs), mold and pests to thrive and can result in risks for food contamination and spread of foodborne illness (any illness resulting from eating contaminated/spoiled foods). Findings:During a concurrent observation and interview on 04/7/2026 at 9:36 a.m. with the Dietary Manager (DM) , while on initial tour of the kitchen, there were gouges noted in the kitchen floor between the stove and the cook's tray line counter, and cracked and broken tiles on the floor of the dry good storage room. The DM confirmed the presence of the gouges and cracked/broken tiles and stated there is a plan to make repairs to damaged floors. A review of the facility policy titled, Quality of Life- Homelike Environment, revised 5/2017, indicated, .Resident are provided with a safe, clean. environment. The facility staff and management shall maximize, to the extent possible.clean, sanitary and orderly environment.

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 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, interviews, and record reviews, the facility's direct care and maintenance staff failed to provide a homelike environment for one resident (Resident 47) of 29 sampled residents, when the wall and its baseboard molding that her bed's headboard was pushed up against needed repair.This failure decreased the facility's potential to provide Resident 47 with a clean and homelike environment.Findings:A review of Resident 47's Brief Interview for Mental Status (BIMS) dated January 2023 indicated Resident 47 was rarely/never understood.A review of Resident 47's Face Sheet, indicated she had a medical diagnosis of severe vascular dementia (a chronic condition caused by reduced blood flow to the brain which results in a decline in thinking skills). This document indicated Resident 47's had a Responsible Party (RP, a person who manages healthcare decisions for another because they are no longer able to).During an interview on 4/9/26 at 4 p.m., Resident 47's RP stated he visited Resident 47 at the facility and observed issues on the wall behind her mother's bed. Resident 47's RP stated he complained about this to a facility staff a long time ago and nothing had been done about it.During a concurrent observation and interview with the Maintenance Director and two other maintenance staff, on 4/9/26 at 4:25 p.m., Resident 47's bed away from the wall. The baseboard molding of the wall was damaged. Four photos taken by this surveyor showed dust and debris had collected on the floor at the base of the damaged baseboard molding. The Maintenance Director stated he was not aware of this issue. During an interview on 4/10/26 at 12:03 p.m., the Maintenance Director stated he expected staff to write their concerns regarding repairs on the maintenance log. A review of the facility's policy and procedure (P&P) titled, Environmental Services Policy and Procedure, Floor Maintenance Room Maintenance, dated July 2024, indicated, The facility shall maintain all floor maintenance rooms in a clean, safe, organized, and sanitary condition to ensure resident and staff safety, and comply with Title 22 and CMS (Centers for Medicare Medicaid) environmental standards. Floor maintenance rooms shall be used only for approved housekeeping equipment and supplies and shall not create hazards or risk of contamination.A review of the facility's P&P titled, Quality of Life-Homelike Environment, dated May 2017, indicated, Residents are provided with a safe, clean, comfortable, and homelike environment .The facility staff and management shall maximize, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include: Clean, sanitary, and orderly environment.