

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056120	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/23/2024
NAME OF PROVIDER OR SUPPLIER North Bay Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 300 Douglas Street Petaluma, CA 94952	

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)
<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>46132</p> <p>Based on interviews and record reviews, the facility failed to ensure a sexual abuse allegation between Unlicensed Staff B (ULS B) and Resident 1 was reported within the 2 hour abuse reporting time frame.</p> <p>Findings:</p> <p>A review of the facility ' s initial report indicated an abuse allegation was reported to the state on 12/9/24.</p> <p>A review of the Summary-Staff-to-Resident Allegation indicated that on 12/9/24, ULS D reported that Resident 1 told him she was having inappropriate texts and inappropriate interactions with ULS B.</p> <p>A review of the staffing assignment sheet indicated ULS D was assigned to work on 12/8/24 on afternoon shift and Resident 1 was under his care at that time. ULS D reported to the ADM on 12/9/25 the sexual abuse allegation between ULS B and Resident 1.</p> <p>A review of the written statement by ULS D, undated, confirmed he was working with Resident 1 on 12/8/24.</p> <p>During an interview on 12/23/24 at 12:30 p.m., LN A stated it was important that abuse allegations were reported timely to ensure interventions to keep residents safe were in place immediately.</p> <p>During a concurrent interview and initial facility report record review dated 12/9/24 on 12/23/24 at 1:10 p.m., the ADM confirmed the staff reported the incident to him.</p> <p>During a concurrent interview, written statement by ULS D, staffing assignment dated 12/8/24 and facility initial report dated 12/9/24 record review on 12/23/24 at 1:55 p.m., the Interim Director of Nursing (IDON) stated everyone was a mandated reporter. The IDON stated it was important to report abuse allegations timely to ensure residents safety. A review of facility ' s staffing assignment dated 12/8/24 indicated ULS D was working on 12/8/24. The IDON verified the abuse allegation was reported late based on the facility ' s abuse reporting policy time frame. The IDON stated the abuse policy was not followed when the abuse allegation was not reported within the 2-hour time frame.</p> <p>(continued on next page)</p>

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 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a concurrent interview and abuse policy record review on 12/23/24 at 2:00 p.m., when asked how soon an abuse allegation was to be reported to the State, the Ombudsman and local PD, the ADM stated within 24 hours. The ADM was not familiar with the reporting time frame for abuse allegations. The ADM stated based on this policy, the abuse allegation was reported late.</p> <p>During a telephone interview on 1/6/24 at 11:39 a.m., ULS D confirmed Resident 1 reported to him the abuse allegation on 12/8/24 and he reported the alleged abuse allegation to the ADM a day later, 12/9/24. ULS D confirmed he reported the abuse allegation late.</p> <p>A review of the facility ' s policy and procedure, untitled, undated, policy indicated, all alleged violations of abuse neglect, exploitation, mistreatment, including injuries of unknown source and misappropriation of resident property, the mandated reporter shall .make phone report or call 911 immediately no later than 2 hours to the local law enforcement and licensing agencies of observing, obtaining, knowledge of, or suspecting the abuse .</p>		