

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056153	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/07/2026
NAME OF PROVIDER OR SUPPLIER Napa Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 705 Trancas St. Napa, CA 94558	
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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility did not initiate the process to replace or reimburse missing dentures for one of three sampled residents (Resident 1) after they were lost at the facility, and instead, filed a claim with Resident 1's own dental insurance company for replacement, rather than assuming financial responsibility. This failure may have contributed to Resident 1 experiencing a weight loss of over nine pounds over the past month, as well as feelings of discomfort regarding dental status leading her to wear a mask. In addition, this had the potential to result in dental insurance fraud. A review of Resident 1's admission Record (facility demographic) indicated she was admitted to the facility on [DATE] with medical diagnoses which included ataxia (lack of muscle coordination), diabetes mellitus (chronic medical condition characterized by high levels of glucose [sugar] in the blood) and feeding difficulties. This document also indicated Family Member XX was Resident 1's responsible party (RP) and financial decision maker. Record review of Resident 1's Minimum Data Set (MDS, an assessment tool) dated 2/24/26 indicated her BIMS (Brief Interview of Mental Status-A cognition [the mental action or process of acquiring knowledge and understanding through thought, experience, and the senses] assessment) score was 12, which indicated her cognition was moderately impaired (A score of 1-7 indicates the cognition is severely impaired, 8-12 indicates the cognition is moderately impaired, and 13-15 indicates the cognition is intact). During a phone interview on 4/07/26 at 9:04 a.m., Family Member XX reported that the facility had informed her around 3/20/26 of the loss of Resident 1's partial dentures, which Resident 1 had upon admission. Family Member XX stated that Resident 1 last observed the dentures placed on her meal tray and suspected they may have been inadvertently disposed of by staff during tray collection. Family Member XX indicated that Resident 1 was now experiencing difficulty eating and felt self-conscious about the absence of teeth, as demonstrated by consistent mask-wearing. Family Member XX further stated that she was notified by facility staff that a dental insurance claim for replacement of Resident 1's dentures had been denied, appealed, and could require additional time for resolution. Family Member XX expressed concern regarding the management of this situation. A review of Resident 1's inventory sheet (list of personal belongings) dated 2/23/21, and signed by a facility representative, verified Resident 1 possessed partial dentures when admitted to the facility. During an interview on 4/07/26 at 9:35 a.m., Social Services Director A (SSD A) stated that the facility's dentist (Dentist B) had evaluated Resident 1 following the loss of her dentures, which occurred around 3/23/26. SSD A stated that Dentist B submitted a claim to Resident 1's dental insurance for denture replacement, which was denied, however, an appeal of the denial was in the process of being filed and a response was pending. Additionally, SSD A explained that the case was complex because Dentist B had informed her that functional well-fitting dentures could not be created for Resident 1 without extractions of her remaining teeth prior to creating new dentures; however, Resident 1 was reluctant to have her natural teeth extracted. SSD A provided Dentist B's contact information, but efforts to reach Dentist B by phone were unsuccessful after two attempts. During a concurrent observation and interview with Resident 1 in her room on 4/07/26 at 11:05 a.m., she was (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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>observed wearing a face mask unlike other residents. Prior to this interview, the resident was observed in the activities room with other residents also wearing her mask. During the interview, when asked about the circumstances regarding her missing dentures, Resident 1 stated, A girl [staff member] threw them away. Resident 1 acknowledged she was wearing a mask due to feeling self-conscious about not having teeth. Resident 1 confirmed she needed her dentures, which had not been replaced yet. When questioned about her willingness to undergo extraction of her natural teeth for new dentures, she stated that she was agreeable to the procedure. A review of SSD A's progress note dated 4/02/26 at 6:41 a.m., indicated, SSD [SSD A] received a message from [health insurance company] informing SSD that [Family Member XX] was concerned with pt. [patient, Resident 1] not eating due to not having her partial [partial dentures]. [Dentist B] replied back stating that an authorization was submitted to insurance with denied claim due to pt. not wanting to proceed with extractions. [Dentist B] spoke with [Family Member XX] who advised [Dentist B] to proceed with an appeal. During a second phone interview with Family Member XX on 4/07/26 at 11:53 a.m., she stated that the facility did not offer her the option to pay directly for Resident 1's missing dentures, and instead, she was given the choice to file a claim with Resident 1's dental insurance company for replacements, which she accepted, not being conscious of other solutions. Family Member XX further stated that both she and Resident 1 initially disagreed with proceeding with tooth extractions in December of 2025, however, they had not been asked again after the dentures went missing. Family Member XX stated consent for the extraction of Resident 1's remaining teeth should it be necessary for the provision of new dentures. During a second interview on 4/07/26 at 12:05 p.m., SSD A confirmed that there were no notes or documentation on Resident 1's medical record, from Dentist B regarding her missing dentures, although Resident 1 had been evaluated by Dentist B, last week, with no specific date provided. When questioned about the rationale for filing a claim with Resident 1's insurance company for the replacement of the missing dentures rather than having the facility bear the cost, SSD A stated, [Dentist B] stated he would try the insurance first and go from there. SSD A was also asked whether Family Member XX or Resident 1 had been consulted about tooth extractions required for the replacement of the dentures after their loss; she responded that she did not know, as she was not present during Dentist B's discussion with them. Additionally, when asked about the required timeframe for initiating the replacement or reimbursement process for missing dentures, SSD A stated that the facility was required to begin within three days of the dentures being reported missing. A review of Resident 1's weight records for March and April of 2026, indicated she lost 9.6 pounds from 3/06/26 to 4/07/26, which was 3% of her total body weight. Yet, from 2/05/26 to 3/05/26, when Resident 1 still had her dentures, she had only lost one pound. A review of an email sent by the Surveyor to the Medical Records Director on 4/07/26 at 11:40 a.m. indicated that the Surveyor requested the facility's policy regarding lost or missing personal items belonging to residents. The facility responded by emailing a policy titled, Investigating Incidents of Theft and/or Misappropriation of Resident Property, on 4/08/26 at 12:24 p.m. This policy did not address the facility's financial responsibility for residents' possessions lost during their stay, instead, it outlined procedures for conducting investigations following incidents involving theft or misappropriation.</p>		