

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 08/27/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056231	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/10/2026
NAME OF PROVIDER OR SUPPLIER Lassen Nursing & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2005 River Street Susanville, CA 96130	
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 0600 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to prevent verbal and physical abuse for three of five sampled residents (Residents 1, 2, and 5) when: Resident 2 hit Resident 1 in the arm twice Resident 3 pulled Resident 2's hair and spit on Resident 4 Nursing Assistant (NA 2) sprayed Resident 5 in the face with the shower nozzle, tossed her in bed and verbally threatened her. These failures had the potential to result in psychological, behavioral, and psychosocial outcomes causing fear, anxiety, and adverse outcomes. During a review of the facility's policy and procedure titled, Abuse Prevention Program indicated, the residents have the right to be free from abuse, neglect, misappropriation of resident property, corporal punishment and involuntary seclusion. The facility is committed to protecting our residents from abuse by anyone, including, but not necessarily limited to: facility staff, other residents, family members. During a review of the facility's policy and procedure titled, Resident Rights indicated, Employees shall treat all residents with kindness, respect, and dignity. 1. Resident 1 was admitted to the facility on [DATE] with a diagnosis that included, dementia (memory loss, confusion, and poor judgement), and muscle weakness. A review of Resident 1's Minimum Data Set (an assessment and care screening tool) (MDS), dated 9/5/2025, indicated Resident 1's Brief Interview for Mental Status (BIMS) score was 3 out of 15 (severe cognitive impairment). Resident 2 was admitted to the facility on [DATE] with a diagnosis that included, diabetes, substance abuse, bipolar (a condition that causes mood swings), and chronic pain. A review of Resident 2's MDS, dated [DATE], indicated Resident 2's BIMS score was 15, cognitively intact. During an interview on 5/14/26 at 8:15 a.m., with Resident 2, Resident 2 stated, I feel bad for hitting [Resident 1]. I know I shouldn't hit other people. But I was taught to fight back if I needed to. I will try not to do it again, but I can't make any promises. During an interview on 5/27/26 at 1:30 p.m., with Certified Occupational Assistant (COTA), COTA stated, I was walking into the dining room. The residents were watching a movie and [Resident 2] was in the middle of the room. [Resident 1] was rolling toward her, and [Resident 2] said don't come over here. I heard [Resident 2] yell at [Resident 1], and I tried to get to them before something happened. I saw that [Resident 1] was reaching for the back of [Resident 2's] wheelchair handle and then [Resident 2] turned and open-handedly hit [Resident 1] a few times. [Resident 2] said keep him away or we will see what happens. During a review of Resident 2's, Social Service Note (SSN), dated 5/8/26 at 7:41 p.m., the SSN indicated, Resident 2 stated, [Resident 1] was rolling towards me, and he would not listen to me, I thought he was going to hurt me, he got what he deserved for being in my way. During a record review of the facility document titled, Witness statement, dated 5/7/26, the Witness statement indicated, Resident 1 reached toward the back handle of Resident 2's wheelchair, Resident 2 turned and began to punch out at Resident 1. Resident 1 began to roll backward with his fists raised. Resident 2 yelled, try to swing at me you son of a bitch. Resident 1 had been struck on his arm by Resident 2 twice. 2. Resident 2 was admitted to the facility on [DATE] with a diagnosis that included, diabetes, substance abuse, bipolar (a condition that causes mood swings), and chronic pain. A review of Resident 2's MDS, dated [DATE], indicated Resident 2's BIMS score was 15, cognitively intact. During an interview on 5/14/26 at 9:13 a.m., with (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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 056231 If continuation sheet Page 1 of 2

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F 0600 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Resident 2, Resident 2 stated, [Resident 3] came up to [Resident 4] and spit on her then turned toward me and grabbed a big chunk of my hair and pulled really hard and pulled a chunk out. So, I grabbed her hair and I pulled her to the ground. [Resident 3] yelled at me and told me she was going to get me. During a review of Resident 2's SSN, dated 3/22/26 at 5:10 p.m., the SSN indicated, Resident 2 stated, [Resident 3] was being crazy, she spit on [Resident 4] and then grabbed hold of my hair so then I grabbed [Resident 3's] hair back and pulled her to the ground. During a review of Resident 2's SSN, dated 3/23/26 at 4:15 p.m., the SSN indicated Resident 2 stated, [Resident 3] got what she got. During a record review of the facility document titled, Witness statement, dated 2/23/26, the Witness statement indicated, Resident 2 was noted to have some of her hair pulled out during the altercation. Resident 3 was admitted to the facility on [DATE] with a diagnosis that included, bipolar, dementia, and muscle weakness. A review of Resident 3's MDS, dated [DATE], indicated Resident 3's BIMS score was 3. During a review of the Resident 3's SSN, dated 3/14/26 at 8:46 p.m., the SSN indicated, Resident 3 entered another residents room and became verbally aggressive towards the resident with her fists clenched. As staff began to escort Resident 3 back to her room she became aggressive toward staff and threw the liquids from her cup into staff's face. During a review of Resident 3's SSN dated 3/15/26 at 12:19 a.m., the SSN indicated, Resident 3 approached a resident standing at the medication cart and tried to grab them by the back of the head. When stopped Resident 3 became enraged put her fists up and stated, F.U. bitch, get the F. out of this place. Then Resident 3 spit in the nurses face. During a review of Resident 3's SSN, dated 3/1/26 at 7:01 a.m., the SSN indicated Resident 3 had been having multiple behaviors of physical and verbal aggression towards staff. Resident 3 walked up to nurse and pulled her hair and threatened to hit her. During a review of Resident 3's Care Plan, revised on 3/25/26, the Care Plan indicated, Resident 3 continues to have aggressive behaviors towards others, spitting, wandering and agitation. Resident 4 was admitted to the facility on [DATE] with a diagnosis that included, chronic respiratory failure, adult failure to thrive, and difficulty walking. A review of Resident 4's MDS, dated [DATE], indicated Resident 1's BIMS score was 15. During an interview on 5/14/26 at 11:48 a.m., with Resident 4, Resident 4 stated, I remember [Resident 3] was mad and walked right up to where I was sitting and spit. During an interview on 5/27/26 at 1:00 p.m., with Director of Nursing (DON), DON said, Resident 3 had aggression towards staff upon admission. During a review of Resident 4's SSN, dated 3/12/26 at 5:02 p.m., the SSN indicated Resident 4 said Resident 3 had spit on her. 3. Resident 5 was admitted to the facility on [DATE] with a diagnosis that included, weakness, bipolar, and diabetes. A review of Resident 5's MDS, dated [DATE], indicated Resident 5's BIMS score was 9, moderate cognitive impairment. During an interview on 5/14/26 at 10:00 a.m., with Resident 5, Resident 5 said, she remembered a girl that worked here was mean to her in the shower. During an interview on 5/27/26 at 3:39 p.m., with NA 1, NA 1 said she witnessed NA 2 grabbed the shower head and say to Resident 5, if you hit me, I'm going to spray you with cold water and sprayed Resident 5 in the face. Then when we got back to Resident 5's room NA 2 tossed Resident 5 on her bed. NA 2 then turned to NA 1 and said she [Resident 5] is going to learn to not talk back to me. During a review of Resident 5's SSN dated 12/22/25 at 5:20 p.m., the SSN indicated Resident 5 stated, she [NA 2] hit me and sprayed my face.		