

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056260	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/05/2025
NAME OF PROVIDER OR SUPPLIER Bayberry Skilled Nursing & Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1800 Adobe Street Concord, CA 94520	
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 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</p> <p>Based on interview and record review, the facility failed to ensure one of three sampled residents (Resident 1) reviewed for allegations of abuse was free from physical abuse when Certified Nursing Assistant (CNA) 1 forcefully turned Resident 1 while on the shower chair, forcefully removed Resident 1's clothing, hitting Resident 1's hand, and pulling Resident 1's hair.</p> <p>This failure resulted in Resident 1 to experience physical abuse and pain.</p> <p>Findings:</p> <p>During a review of Resident 1's undated admission Record , the admission Record printed on 5/5/25 indicated, Resident 1 was admitted in the facility on 5/15/23 with a diagnosis of Alzheimer's disease (progressive brain disorder that gradually destroys memory and thinking skills, ultimately impacting the ability to carry out even simple tasks).</p> <p>During a review of Resident 1's Minimum Data Set (MDS, a resident assessment instrument used to identify resident care problems to be addressed in an individualized care plan.) , dated 1/20/25, the MDS indicated, Resident 1 had a Brief Interview for Mental Status (BIMS, is a scoring system used to determine the resident's cognitive status in regard to attention, orientation, and ability to register and recall information) score of 3 out of 15, indicating sever cognitive impairment.</p> <p>During a phone interview on 6/5/25 at 1:24 p.m. with Certified Nursing Assistant Student (CNAS) 1, CNAS 1 stated seeing CNA 1 forcefully turned Resident 1 who was sitting on a shower chair in the room causing Resident 1's left arm to hit the wall by the door. CNAS 1 stated hearing Resident 1 saying No, no, no when CNAS 1 was trying to remove Resident 1's top in the shower room. CNAS 1 stated informing CNA 1 that Resident 1 kept saying no. CNAS 1 stated seeing CNA 1 enter the shower room and forcefully removed Resident 1's top. CNAS 1 also stated seeing CNA 1 smack Resident 1's right hand and pull Resident 1's hair on the left side when Resident 1 pinched CNA 1's hand.</p> <p>During a phone interview on 6/5/25 at 2:08 p.m. with CNA 1, CNA 1 stated she tried to communicate to Resident 1 through hand gestures but was unsuccessful when Resident 1 was combative prior to shower. CNA 1 stated placing Resident 1's left and right arm on her abdomen with one hand to stop Resident 1 from hurting her.</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 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a phone interview on 6/5/25 at 3:31 p.m. with CNAS 2, CNAS 2 stated seeing CNA 1 forcing to take Resident 1's clothes. CNAS 2 stated seeing Resident 1 pinch and push CNA 1's hand away. CNAS 2 stated seeing CNA 1 pinning Resident 1's hand down, using force to take Resident 1's clothes off. CNAS 2 stated seeing CNA 1 slap Resident 1's hand.</p> <p>During a review of Resident 1's Progress Notes , dated 3/27/25, the Progress Notes indicated, facility staff made contact with Resident 1's hand in a slapping motion and tugged a part of Resident 1's hair. The progress notes indicated, Resident 1 had a new pain on left later/left front shoulder on assessment. The progress notes also indicated Resident 1 showed signs of pain.</p> <p>During a review of facility's policy and procedure (P&P) titled Abuse, Neglect, Exploitation and Misappropriation Prevention Program , dated 4/21, the P&P indicated, Resident have the right to be free from abuse . This includes but is not limited to freedom from . physical abuse .</p>