

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 05A340	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/20/2024
NAME OF PROVIDER OR SUPPLIER Crestwood Manor - 104		STREET ADDRESS, CITY, STATE, ZIP CODE 1130 Monaco Court Stockton, CA 95207	

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 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Permit a resident to return to the nursing home after hospitalization or therapeutic leave that exceeds bed-hold policy.</p> <p>43943</p> <p>Based on interview and record review, the facility failed to ensure one of three sampled residents (Resident 1) was permitted to return to the facility after Resident 1 was transferred from the facility to an acute care facility (hospital) for stabilization.</p> <p>This failure resulted in Resident 1 being held in a temporary facility (acute care) for five days and not returning to the facility she had been at for nearly nine months, which could have resulted in emotional distress.</p> <p>Findings:</p> <p>A review of Resident 1 ' s clinical record titled, Admission Record (a document that contained the resident ' s demographic information), indicated Resident 1 ' s diagnoses included Schizophrenia (a serious mental health condition that affected how people think, feel, and behave) and an anxiety (worried) disorder.</p> <p>A review of Resident 1 ' s clinical record titled, Progress Notes, dated 8/17/24, at 1:00 p.m., by the Psychiatric Technician (PT), indicated Resident 1 showed signs of aggression toward staff and lorazepam (anti-anxiety medication) was administered to Resident 1 via an intramuscular (IM - in the muscle) injection (shot).</p> <p>A review of Resident 1 ' s clinical record titled, Progress Notes, dated 8/17/24, at 1:38 p.m., by Licensed Nurse (LN) 1, indicated Resident 1 was transferred to [ACUTE CARE HOSPITAL NAME] at 1:24 p.m.</p> <p>A review of Resident 1 ' s clinical record from [ACUTE CARE FACILITY NAME], titled, ED [Emergency Department] Physician Notes, dated 8/17/24, at 2:32 p.m., by ED Physician 1 (ED Phys) 1, indicated, . the patient is stable for discharge and does not need to be here in the emergency department. Unfortunately when we called the facility to discharge her back to the facility they refused stating that she was not allowed to come back . The patient will remain here in the emergency department pending disposition [discharge] .</p> <p>A review of Resident 1 ' s clinical record from [ACUTE CARE FACILITY NAME], titled, ED Note, dated 8/17/24, at 6:29 p.m., by Emergency Department Staff (EDS) 2, indicated Resident 1 ' s overall behavior was calm and cooperative.</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 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>A review of Resident 1 ' s clinical record titled, Progress Notes, dated 8/17/24, at 10:30 p.m., by LN 2, indicated, Around 4:30 writer received a call from the social worker from [ACUTE CARE HOSPITAL NAME] and asking if we are taking resident back to the facility. Writer explained that we are not taking her back .</p> <p>A review of Resident 1 ' s clinical record from [ACUTE CARE FACILITY NAME], titled, ED Physician Notes, dated 8/18/24, at 4:05 PM, by ED Phys 2, indicated, . patient has been medically cleared . Currently the placement facility where she was staying is [sic] refused to take her back. Nursing is interviewed no acute [new] events overnight .</p> <p>A review of Resident 1 ' s clinical record from [ACUTE CARE FACILITY NAME], titled, ED Note, dated 8/18/24, at 6:12 p.m., by EDS 2, indicated Resident 1 was calm and cooperative and had not required a safety attendant (staff member who monitored the resident's behavior).</p> <p>A review of Resident 1 ' s clinical record titled, Physician ' s Orders, dated 8/19/24, by the Medical Director (MD), indicated Resident 1 was discharged from the facility.</p> <p>A review of Resident 1 ' s clinical record from [ACUTE CARE FACILITY NAME], titled, ED Note, dated 8/19/24, at 5:51 p.m., by EDS 1, indicated, . Following medical clearance, EDS 1 was advised that the facility is evicting (not allowed to return) the pt [patient] .</p> <p>During an interview on 8/20/24, at 10:40 a.m., with the Director of Nursing (DON), DON stated the facility did not have a bed hold (save the resident ' s bed for return) for Resident 1 and Resident 1 was discharged from the facility. DON stated Resident 1 would remain at the [ACUTE CARE FACILITY NAME] until placement at another facility was secured.</p> <p>During an interview on 8/20/24, at 10:50 a.m., with the Social Services Designee (SSD), SSD stated the facility ' s normal practice when a resident was transferred out of the facility included serving the resident and/or the resident ' s conservator (court appointed person who made decisions for the resident when the resident was not able to do so independently) with a 7-day bed hold or a 30 day transfer or discharge notice (notice that after 30 days the resident would be transferred or discharged from the facility). SSD stated the facility was not anticipating Resident 1 to return to the facility.</p> <p>During a follow up interview on 8/20/24, at 11:55 a.m., with DON, DON stated Resident 1 and/or her conservator were not provided at 7-day bed hold notice or a 30-day discharge or transfer notice as of 8/20/24 at 11:55 a.m. The DON stated the facility should have provided notice to Resident 1 and/or the conservator when the decision was made by the DON and Administrator (ADM) that Resident 1 would not be returning to the facility.</p> <p>During an interview on 8/20/24, at 12:30 p.m., with the Psychiatric Medical Doctor (PMD), PMD stated when Resident 1 took her prescribed medications she did not have many psychiatric (mental) problems. PMD stated he last evaluated Resident 1 the week of 8/5/24. PMD stated he did not re-evaluate Resident 1 after Resident 1 was transferred to [ACUTE CARE HOSPITAL NAME] on 8/17/24.</p> <p>During a follow up interview on 8/20/24, at 1:50 p.m., with DON, DON stated the facility currently had 12 empty beds.</p> <p>(continued on next page)</p>		

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<p>F 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>During an interview on 8/20/24 at 3:56 p.m., with DON, DON stated neither MD nor PMD had gone to [ACUTE CARE FACILITY NAME] to re-evaluate Resident 1 for the ability to return to the facility. DON stated the facility had only been in contact with [ACUTE CARE FACILITY NAME] once on 8/17/24 when [ACUTE CARE FACILITY NAME] wanted to discharge Resident 1 back to the facility.</p> <p>During an interview on 8/21/24, at 1:45 p.m., with Resident 1's conservator (Conserv), Conserv stated Resident 1 was still at [ACUTE CARE HOSPITAL NAME]'s ED and waiting for placement at a facility.</p> <p>During a review of the facility ' s Policy and Procedure (P&P) titled, Bed-Hold and Return to the Facility, dated 11/18/16, indicated, . Residents . have the right to secure a bed hold during hospitalization . or leave from the facility . C. At the time of transfer to an acute hospital in a medical emergency, or within 24 hours of the transfer, the facility . will provide to the resident and the resident representative, written bed-hold notice which specifies: iii. The resident is permitted to return to the facility to their previous room .</p> <p>During a review of the facility's P&P titled, Transfer And Discharge/Notice, dated 11/16/16, indicated, . 4. Written notice of Transfer or Discharge includes A. The reason for the transfer or discharge; B. The effective date of transfer or discharge; C. The location to which the resident is transferred or discharged ; D. A statement of the resident ' s appeal rights . 7. When the resident is to be transferred to another . setting or discharged . a facility designee assures the notice of transfer/discharge has been given to the resident/family surrogate .</p>		