

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555208	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/29/2025
NAME OF PROVIDER OR SUPPLIER  Westgate Gardens Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  4525 W. Tulare Ave. Visalia, CA 93277	

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>34401</p> <p>Based on interview and record review, the facility failed to provide a written report of an allegation of sexual abuse to the proper authorities for two of three sampled residents (Resident 1 and Resident 2). This violated Resident 1 and Resident 2's rights.</p> <p>Findings:</p> <p>During an interview on 1/28/25 at 9 a.m. with Ombudsman (an advocate for residents of nursing homes), Ombudsman stated they did not receive an SOC 341 (a required form used to report suspected abuse of dependent adults and elders) from the facility regarding the allegation of sexual abuse between Resident 1 and Resident 2.</p> <p>During a review of Resident 2 ' s Progress Notes (PN), dated 1/12/25 at 2:06 p.m., the PN indicated, Writer made aware by CNA (Certified Nursing Assistant) that resident [Resident 2] was found in between station 2 &amp; 3 inappropriately touching a female resident [Resident 1].</p> <p>During an interview on 1/29/25 at 12:05 p.m. with Licensed Vocational Nurse (LVN), LVN stated on 1/12/25 at approximately 12:45 pm, CNA was passing in between stations when Resident 2 was observed with his hands on top of Resident 1 ' s peri (small patch between private area and anus) area.</p> <p>During an interview on 1/29/25 at 1:04 p.m. with Director of Nurses (DON), DON stated she did not fill out the SOC 341 and did not send the SCO 341 to the Ombudsman.</p> <p>During a concurrent interview and record review on 1/29/25 at 1:22 p.m. with Administrator, Administrator reviewed the Mandated Reporter (MR) pathway located at the nurse ' s station. Administrator stated based on the MR pathway, law enforcement and Ombudsman were to be notified immediately or as soon as practically possible by phone and written report (SOC 341) within 24 hours of the alleged sexual abuse.</p> <p>During an interview on 1/31/25 at 1:05 p.m. with Administrator, Administrator was unable to provide documented evidence the written SOC 341 was provided to the Ombudsman.</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 review of the All Facilities Letter (AFL), dated 2/28/24, received from Administrator, the AFL indicated, For incidents involving resident-on-resident abuse that did not result in bodily harm where the alleged abuser is a resident diagnosed with dementia, facilities are required to notify the ombudsman and local law enforcement in writing within 24 hours.</p> <p>During a review of the facility ' s policy and procedure (P&amp;P) titled, Abuse, Neglect, exploitation or Misappropriation-Reporting and Investigating dated 2022, the P&amp;P indicated, 4. Verbal/written notices to agencies are submitted via special carrier, fax, e-mail, or by telephone.</p>