

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555260	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/15/2024
NAME OF PROVIDER OR SUPPLIER Bakersfield Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 6212 Tudor Way Bakersfield, CA 93306	

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 0558</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Reasonably accommodate the needs and preferences of each resident.</p> <p>50939</p> <p>Based on observation, interview, and record review, the facility failed to ensure four of four sampled residents' (Resident 1, Resident 2, Resident 3, and Resident 4) call lights were answered timely. This failure had the potential for residents not being assisted with their activities of daily living (ADL) affecting their quality of life.</p> <p>Findings:</p> <p>During an interview on 6/14/24 at 10:29 a.m., with Resident 1, Resident 1 stated, When I use the call light for assistance, the longest I wait is an hour until someone comes to my room to help me, and I couldn't wait that long to use the bathroom.</p> <p>During a review of Resident 1's Minimum Data Set (MDS-Assessment Tool), dated 5/4/24, the MDS indicated Resident 1 requires the assistance of one staff with transfer from bed to a wheelchair and with toileting. The MDS indicated Resident 1 had a (BIMS- Brief Interview for Mental Status) score of 14 (score of 13-15 means cognitively intact).</p> <p>During a review of Resident 1's Care Plan (CP), dated 5/02/24, the CP indicated, ADL/Mobility [the ability of a resident to change and control their body position]: Resident has actual/is at risk for ADL/Mobility decline and requires assistance related to fluctuating ADLs, fracture, mood problems, pain, recent hospitalization , recent surgery, weakness. Goal: Will have no significant declines in ADLs or mobility. Interventions: Assist of substantial [of ample or considerable amount, quantity, size].</p> <p>During an interview on 6/14/24 at 10:54 a.m., with Resident 2, Resident 2 stated he waits 15 minutes and up to one hour until his call light is answered by a staff member to assist him to change his brief.</p> <p>During a review of Resident 2's MDS , dated 3/18/24, the MDS indicated Resident 2 requires the assistance of one staff with toileting. The MDS indicated Resident 1 had a BIMS score of 15.</p> <p>During an interview on 6/14/24 at 11:01 a.m., with Resident 3, Resident 3 stated she waits 25 minutes up to two hours when her call light is answered by staff to assist 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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0558</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of Resident 3's MDS , dated 3/13/24, the MDS indicated Resident 3 requires the assistance of one or two-person assist with toileting and lower body dressing. The MDS indicated Resident 1 had a BIMS score of 15.</p> <p>During an interview on 6/14/24 at 11:11 a.m., with Certified Nursing Assistant (CNA) 1, CNA 1 stated, Sometimes we are short-handed on staff.</p> <p>During an interview on 6/14/24 at 11:14 a.m., with Resident 4, Resident 4 stated when she uses her call light, she waits 30 minutes and up to one hour until staff comes into her room to assist her.</p> <p>During a review of Resident 4's MDS , dated 3/8/24, the MDS indicated Resident 4 requires one-person assist with toileting. The MDS indicated Resident 1 had a BIMS score of 15.</p> <p>During a review of the facility's policy and procedure (P & P) titled, Answering the Call Light, dated October 2012, the P & P indicated, Answer the resident's call as soon as possible.</p>