

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555400	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/09/2026
NAME OF PROVIDER OR SUPPLIER  North Pointe Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  500 Jessie Avenue Sacramento, CA 95838	

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>Note: The nursing home is disputing this citation.</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview and record review, the facility failed to implement policies and procedures (P&amp;P) for ensuring the reporting of a reasonable suspicion of abuse in accordance with section 1150B of the Act for one out of 37 sampled residents (Resident 42) when Resident 42 was suspected for elderly financial abuse by her conservator (a court-appointed individual who manages the financial and/or personal affairs for someone unable to do so themselves) and was not reported to the state agency, local ombudsman, adult protective services, and law enforcement officials. This failure resulted in a delayed investigation of the suspicion of Resident 42's financial abuse and placed Resident 42 at risk of experiencing further financial abuse, and possible serious psychosocial harm. Findings: A review of Resident 42's clinical record indicated Resident 42 was admitted May of 2023 and had diagnoses that included metabolic encephalopathy (a condition where the brain does not receive enough nutrients or oxygen to function properly, leading to altered brain function), dementia (memory loss that interferes with daily functions), and need for assistance with personal care. A review of Resident 42's Minimum Data Set (MDS- a federally mandated resident assessment tool) Cognitive Patterns, dated 11/24/25, indicated Resident 42 was rarely/never understood. A review of the complaint letter forwarded by the Department of Justice, dated 7/23/25, indicated, [Resident 42] is currently residing at [name of the facility] .She was previously conserved by [resident 42's sister]. [Resident 42] was admitted to SNF [Skilled Nursing Facility] in May 2023. [Resident 42's sister] has not paid the share-of-cost of the facility since March 2024. Sutter County Public Conservator's office was able to access bank records which show [Resident 42's sister] withdrawing [Resident 42]'s full monthly income (minus \$25/month for bank fees) .During a concurrent interview and record review on 1/7/26 at 10:12 a.m. with the Business Office Assistant (BOA), Resident 42's records were reviewed. The BOA confirmed that Resident 42's sister/responsible person (RP) has not paid Resident 42's share of cost (SOC- a specific monthly dollar amount some people must pay for healthcare services before Medi-Cal starts paying) from the time it started generating. The BOA explained that usually, the RP will send a check to the facility to pay the resident's share of cost. The BOA also stated she remembers calling Resident 42's sister every week or every other week, but she would not respond at all. The BOA stated she suspected Resident 42 was getting financially abused and that was when she told the Social Services Director (SSD) that Resident 42's sister was not returning their calls and had not paid Resident 42's share of cost for months. During a concurrent interview and record review on 1/7/26 at 10:22 a.m. with the Business Office Manager (BOM), Resident 42's records were reviewed. The BOM confirmed that Resident 42's sister was the conservator upon her admission to the facility. The BOM also confirmed that Resident 42's share of cost had not been paid since March of 2024. The BOM stated she believed the conservator would handle the resident's money. The BOM also stated she reached out to the SSD on 4/22/25 through their internal communication system regarding their suspected financial abuse of Resident 42.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:  555400	Facility ID:  555400  If continuation sheet Page 1 of 5

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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>Note: The nursing home is disputing this citation.</p>	<p>The BOM explained that when they suspect financial abuse, they reach out to social services department first and they will be the ones to report the suspicion. A review of the internal communication message sent by the BOM on 4/22/25 at 8:42 a.m. to the SSD indicated, I [BOM] was wondering if you [SSD] can do a financial abuse [report] for patients [Resident 42] .please.During an interview on 1/7/26 at 11:14 a.m. with the SSD, the SSD stated Resident 42's sister was originally her conservator and they could not reach Resident 42's sister for some time, so she reached out to the Sutter County's Public Guardian's Office about the issue on 1/30/25. The SSD also stated she did not suspect financial abuse at that time because all she knew was they could not contact Resident 42's sister and she had some remaining balances. The SSD explained that if there was suspicion of financial abuse, they would report it to Adult Protective Services, California Department of Public Health, and to the Ombudsman. The SSD confirmed there was no report made regarding Resident 42's case.A review of Resident 42's Social Service Note, dated 1/30/25, indicated, Writer [SSD] called Sutter County Public Guardians office (530) [PHONE NUMBER] and spoke with [Sutter County Public Guardians office staff] .Writer explained to him that writer has a resident within the SNF who is under a probate conservatorship through sutter county with a family member as the conservator, however we have not been able to reach the family member in some time, and writer would like to know if a referral would be appropriate in this instance .He [Sutter County Public Guardians office staff] stated that he was in court recently and the judge brought up residents [Resident 42] case as a referral for public guardians office, so they are actually already going to be starting the process of investigating and preparing to petition to transfer the conservatorship from resident's sister to the sutter county public guardians office .During an interview on 1/8/26 at 10:46 a.m. with the Administrator (ADM), the ADM stated their process, if there was a suspicion of any form of abuse was, he would get notified first, then they would report the suspicion, and they would do their own investigation. The ADM also stated that reaching out to the Sutter County's Public Guardian's Office regarding Resident 42's case was enough action on their part. The ADM further stated he was made aware about Resident 42's issue before the SSD reached out to the Sutter County's Public Guardian's Office but could not remember the exact date when.During an interview on 1/8/26 at 11:05 a.m. with the ADM, the ADM agreed that it was a red flag when Resident 42's conservator was not answering calls and was not paying Resident 42's share of cost for months. The ADM stated there was no evidence of fiduciary [elderly financial] abuse that was why they did not report Resident 42's issue. The ADM further stated the facility's policy was to report all suspicion of any form of resident abuse including financial abuse. During a concurrent interview and record review on 1/8/26 at 12:46 p.m. with the ADM, Resident 42's records were reviewed. The ADM confirmed that Resident 42 started generating share of cost in March of 2024 and Resident 42's conservator did not pay any of it. The ADM stated that they tried to call Resident 42's conservator multiple times but could not reach her. The ADM further stated they received a letter on 5/15/25 from the Public Guardian's office which indicated that Resident 42's conservatorship was changed from her sister to the Public Guardian's Office and the facility started getting paid for Resident 42's share of cost in August of 2025.During an interview on 1/9/26 at 9:13 a.m. with the Director of Nursing (DON), the DON stated that all suspicion of resident abuse should all be reported for it to be investigated thoroughly.A review of the facility's policy and procedures (P&amp;P) titled, Abuse, Neglect, Exploitation or Misappropriation - Reporting and Investigating, revised 9/2025, indicated, All reports of resident abuse (including injuries of unknown origin), neglect, exploitation, or theft/ misappropriation of resident property are reported to local, state and federal agencies (as required by current regulations) and thoroughly investigated by facility management. Findings of all</p> <p>(continued on next page)</p>		

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<p>F 0610</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>Respond appropriately to all alleged violations.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview and record review, the facility failed to implement policies and procedures (P&amp;P) for ensuring the reporting of a reasonable suspicion of abuse in accordance with section 1150B of the Act for one out of 37 sampled residents (Resident 42) when Resident 42 was suspected for elderly financial abuse by her conservator (a court-appointed individual who manages the financial and/or personal affairs for someone unable to do so themselves) and was not investigated. This failure resulted in Resident 42 experiencing further financial abuse, and possible serious psychosocial harm. Findings: A review of Resident 42's clinical record indicated Resident 42 was admitted May of 2023 and had diagnoses that included metabolic encephalopathy (a condition where the brain does not receive enough nutrients or oxygen to function properly, leading to altered brain function), dementia (memory loss that interferes with daily functions), and need for assistance with personal care. A review of Resident 42's Minimum Data Set (MDS- a federally mandated resident assessment tool) Cognitive Patterns, dated 11/24/25, indicated Resident 42 was rarely/never understood. A review of the complaint letter forwarded by the Department of Justice, dated 7/23/25, indicated, [Resident 42] is currently residing at North Pointe Care Center .She was previously conserved by [resident 42's sister]. [Resident 42] was admitted to SNF [Skilled Nursing Facility] in May 2023. [Resident 42's sister] has not paid the share-of-cost of the facility since March 2024. Sutter County Public Conservator's office was able to access bank records which show [Resident 42's sister] withdrawing [Resident 42]'s full monthly income (minus \$25/month for bank fees) .During a concurrent interview and record review on 1/7/26 at 10:12 a.m. with the Business Office Assistant (BOA), Resident 42's records were reviewed. The BOA confirmed that Resident 42's sister/responsible person (RP) had not paid Resident 42's share of cost (SOC- a specific monthly dollar amount some people must pay for healthcare services before Medi-Cal starts paying) from the time it started generating. The BOA explained that usually, the RP will send a check to the facility to pay the resident's share of cost. The BOA also stated she remembers calling Resident 42's sister every week or every other week, but she would not respond at all. The BOA stated she suspected Resident 42 was getting financially abused and that was when she told the Social Services Director (SSD) that Resident 42's sister was not returning any of their calls and had not paid Resident 42's share of cost for months already. During a concurrent interview and record review on 1/7/26 at 10:22 a.m. with the Business Office Manager (BOM), Resident 42's records were reviewed. The BOM confirmed that Resident 42's sister was the conservator upon her admission to the facility. The BOM also confirmed that Resident 42's share of cost had not been paid since March of 2024. The BOM stated she believed the conservator would handle the resident's money. The BOM also stated she reached out to the SSD on 4/22/25 through their internal communication system regarding their suspected financial abuse of Resident 42. The BOM explained that when they suspect financial abuse, they reach out to social services department first and they will be the ones who would report the suspicion. A review of the internal communication message sent by the BOM on 4/22/25 at 8:42 a.m. to the SSD indicated, I [BOM] was wondering if you [SSD] can do a financial abuse [report] for patients [Resident 42] .please. During an interview on 1/7/26 at 11:14 a.m. with the SSD, the SSD stated Resident 42's sister was originally her conservator and they could not reach Resident 42's sister for some time, so she reached out to the Sutter County's Public Guardian's Office about the issue on 1/30/25. The SSD also stated she did not suspect financial abuse at that time because all she knew was they could not contact Resident 42's sister and she had some remaining balances. The SSD explained that if there was suspicion of financial abuse, they would report it to Adult Protective Services, California Department of Public Health, and to the Ombudsman, then it would be</p> <p>(continued on next page)</p>		

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