

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555658	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/03/2024
NAME OF PROVIDER OR SUPPLIER River Walk Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1100 West Morton Avenue Porterville, CA 93257	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 34401</p> <p>Based on observation, interview, and record review, the facility failed to treat one of three sampled residents (Resident 1) with dignity and respect when Certified Nursing Assistant (CNA 1) used foul language and shooed (make someone go away) Resident 1 away with her hands. This failure resulted in Resident 1 becoming agitated (to feel bothered or worried) and violated Resident 1 ' s rights.</p> <p>Findings:</p> <p>During an interview on 10/3/24 at 10:15 a.m. with Social Service Designee (DSD) and Director of Nurses (DON), SSD stated on 9/28/24 during night shift, two staff (CNA 2 and CNA 3) witnessed CNA 1 using foul language towards Resident 1. DON stated using foul language towards any resident was not acceptable.</p> <p>During a concurrent observation and interview on 10/3/24 at 10:53 a.m. in the dining room, Resident 1 was sitting in a table by himself. Resident 1 was verbal but was unable to answer any questions appropriately.</p> <p>During a review of Resident 1 ' s Admission Record (AR), undated, the AR indicated, Resident 1 had a diagnosis of Lewy body Dementia (condition that affects thinking, movement, behaviors, and mood). Resident 1 ' s quarterly BIMS (Brief Interview for Mental Status-an assessment tool used by facilities to screen and identify memory, orientation, and judgement status of the resident) score dated 7/20/24 indicated, a score of six (a score of 0-7 severely impaired cognition).</p> <p>During a review of Resident 1 ' s Nurses Notes (NN), dated 9/28/24 at 11:37 p.m., the NN indicated, CNA (CNA 1) cussing at resident at around 2245 (10:45 p.m.) . saw the resident (Resident 1) walking by and said ' Eww [NAME], get the fuck away from me, I don ' t fucking like you ' . CNA (CNA 1) turned around and cussed at resident (Resident 1) again telling him to get away from her.</p> <p>During an interview on 10/3/24 at 11:24 a.m. with CNA 2, CNA 2 stated Resident 1 had behaviors of wandering, attempting to leave the facility and likes to go behind staff members and follows them around. CNA 2 stated on 9/28/24 at around 11 p.m. he heard CNA 1 telling Resident 1 to get the fuck away from me, don ' t fucken touch me. CNA 2 stated CNA 1 did not treat Resident 1 with respect.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 10/3/24 at 4:46 p.m. with CNA 3, CNA 3 stated on 9/28/24 she was assigned 1:1 (staff to resident continuous observation) with Resident 1. CNA 3 stated at 10:45 p.m. when Resident 1 stood from the nurse station, CNA 1 told Resident 1 ' eww get the F away from me I don ' t F like you ' and used her hands to shoo him away. At around 2 a.m. while sitting again at the nurse station with Resident 1, Resident 1 became agitated when he saw CNA 1. CNA 3 stated CNA 1 told Resident 1 to ' get the F away from me, your mean I don ' t F like you ' and slammed the door.</p> <p>During an interview on 10/4/24 at 4:05 p.m. with CNA 1, CNA 1 stated on 9/28/24 during night shift, she did not want to get hit by Resident 1, so she shooed him away and told Resident 1 some foul words. CNA 1 stated, It was not appropriate for me to say those words to him (Resident 1)</p> <p>During a review of the facility ' s policy and procedure (P&P) titled, Resident Rights, dated 2/21, the P&P indicated, Employee shall treat all residents with kindness, respect, and dignity. a. a dignified existence;</p>		