

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555909	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/04/2025
NAME OF PROVIDER OR SUPPLIER Colusa Medical Center - Snf		STREET ADDRESS, CITY, STATE, ZIP CODE 199 E Webster Street Colusa, CA 95932	

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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41715</p> <p>Based on interview and record review, the facility failed to develop personalized Activity care plans for four of five residents who were sampled for care plans. (Residents 4, 5, 59, and 110)</p> <p>This had the potential for the residents' activity interests to go unmet and cause them boredom and depression which could negatively impact their rehabilitation goals and psychosocial well-being.</p> <p>Findings:</p> <p>A review of the facility's policy titled, Activity Program revised 4/2024, indicated, The Skilled Nursing Program provides an ongoing program of meaningful activities appropriate to the needs and interests of residents and is an integral part of the resident's overall plan of care. The activities program is staffed and equipped to encourage the participation of each patient, to meet the needs and interest of each patient .2. Each Resident's activity program is implemented for each patient and shall be integrated with the individual interdisciplinary [involving all care areas] patient care plan.</p> <p>A review of Resident 4's Admission record indicated he was admitted on [DATE] with diagnoses that included cellulitis (an infection).</p> <p>A review of Resident 4's care plans reflected there had been no individualized care plan developed which described his activity interests.</p> <p>A review of Resident 5's Admission record indicated he was admitted on [DATE] with diagnoses that included a broken left shoulder.</p> <p>A review of Resident 5's care plans reflected there had been no individualized care plan developed which described his activity interests.</p> <p>A review of Resident 59's Admission record indicated she was admitted on [DATE] with diagnoses that included heart failure.</p> <p>A review of Resident 59's care plans reflected there had been no individualized care plan developed which described her activity interests.</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 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A review of Resident 110's Admission record indicated she was admitted on [DATE] with diagnoses that included kidney disease.</p> <p>A review of Resident 110's care plans reflected there had been no individualized care plan developed which described her activity interests.</p> <p>In an interview on 4/01/25 at 1:20 PM, Activities Director (AD) stated that she interviews residents once a week to conduct assessments of their preferred activity preferences and documents the information in another computer system and not on the residents' actual care plan.</p> <p>In an interview on 4/3/25 at 1:30 PM, the Director of Nursing (DON) confirmed that by using two separate computer programs for activity documentation and care planning resulted in Resident's 4, 5, 59 and 110 not having individualized activity interest care plans developed.</p>		

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<p>F 0727</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.</p> <p>41715</p> <p>Based on interview and record review, the facility failed to ensure they had a Registered Nurse (RN) 8 hours a day, 7 days per week from 4/1/24 to 12/28/24.</p> <p>This failure had potential to affect the quality of care and quality of life of residents and put them at risk for injury by not having an RN to oversee their care.</p> <p>Findings:</p> <p>A review of the Payroll Based Journal (PBJ, an electronic system for facilities to submit staffing information), for Fiscal Year Quarter 3: (April - December 2024), indicated the facility had no RN on duty for:</p> <p>4/21/24, 4/27/24, 4/28/24, 5/4/24, 5/5/24, 5/11/24, 5/12/24, 5/18/24, 5/19/24, 5/25/24, 5/26/24, 6/1/24, 6/2/24, 6/8/24, 6/9/24, 6/15/24, 6/16/24, 6/22/24, 6/23/24, 6/29/24, 6/30/24, 7/6/24, 7/7/24, 7/13/24, 7/14/24, 7/20/24, 7/21/24, 7/27/24, 7/28/24, 8/3/24, 8/4/24, 8/10/24, 8/11/24, 8/17/24, 8/18/24, 8/24/24, 8/25/24, 8/31/24, 9/1/24, 9/7/24, 9/8/24, 9/14/24, 9/15/24, 9/28/24, 9/29/24, 10/5/24, 10/6/24, 10/12/24, 10/13/24, 10/19/24, 10/20/24, 10/26/24, 10/27/24, 11/2/24, 11/3/24, 11/9/24, 11/10/24, 11/16/24, 11/17/24, 11/23/24, 11/24/24, 11/30/24, 12/1/24, 12/7/24, 12/8/24, 12/14/24, 12/15/24, 12/21/24, 12/11/24, 12/28/24, 12/29/24.</p> <p>In an interview and concurrent record review of PBJ staffing on 4/3/25 at 9:36 AM, Director of Nursing (DON) confirmed that there was not a dedicated RN 8 hours per day, 7 days per week, and on weekends to oversee the care of the residents in the facility.</p>