

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/22/2025
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056090	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/16/2025
NAME OF PROVIDER OR SUPPLIER CREEKSIDE REHABILITATION & BEHAVIORAL HEALTH			STREET ADDRESS, CITY, STATE, ZIP CODE 850 SONOMA AVE SANTA ROSA, CA 95404		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 610	<p>Continued From page 1</p> <p>facility failed to complete and provide a timely investigation report for one of two resident abuse allegation incidents (Resident 1) to the Department. This failure subjected Resident 1 to the potential reoccurrence of abuse, and lack of information had the potential to hamper the Department's ability to intervene, should protective actions be required to ensure the safety of the 60 other vulnerable residents in the facility.</p> <p>Findings:</p> <p>A review of the "Intake Information," dated "3/27/25," indicated an allegation of Resident 1 not being treated with dignity and respect by a facility staff member.</p> <p>During an interview on 4/16/25 at 12:05 p.m., Administrator A stated he investigated the allegation Resident 1 made against Housekeeper B but did not send a five-day follow-up Investigation Report to the Department. Administrator A stated he referred to an AFL (All Facilities Letter, or a State letter of communication to providers) and a Mandated Reporter (healthcare professionals have a legal duty to report suspected cases of abuse or neglect) Chart, neither of which indicated a follow-up Investigation Report. Administrator A stated he was not aware a follow-up report was required five days after an abuse allegation incident.</p> <p>A review of the facility policy titled, "Abuse, Neglect, Exploitation and Misappropriation Prevention Program," dated "April 2021," indicated, "Residents have the right to be free</p>	F 610	<p>Prevention of recurrence</p> <p>Per above, the facility will report results of abuse investigations per CFR Section 483.12(c)(4) within 5 working days independent of State Law reporting provisions regardless of state law classification.</p> <p>Monitoring</p> <p>The Administrator will review open abuse investigation files to ensure compliance.</p> <p>System Effectiveness</p> <p>System effectiveness will be evaluated during monthly QAPI meetings for three (3) months</p>		

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F 610	Continued From page 2 from abuse, neglect misappropriation of resident property and exploitation ... The resident abuse neglect and exploitation prevention program consists of a facility-wide commitment and resource allocation to support the following objectives: Identify and investigate all possible incidents of abuse, neglect, mistreatment, mistreatment or misappropriation of resident property ... Investigate and report any allegations within timeframes required by federal requirements ... "	F 610			