



FATE

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Newsletter of Foundation Aiding The Elderly

PRESIDENT'S MESSAGE

By Carole Herman

Several years back, **FATE** hit a milestone when we were able to publish that we have helped families in every state when we finally received a call from a consumer in Rhode Island seeking assistance. This past year, **FATE** hit another monumental milestone when we received our 10,000th call for assistance. Many calls came during COVID as **FATE** kept its doors open to serve the public during that entire dreadful time. We began noting all phone calls back in 1982 when **FATE** was formed. Not all calls require **FATE** to take some type of action. The majority of calls we receive are for information regarding long-term care, residential care and assisted living facilities, acute hospitals, hospice programs, conservatorships and how to obtain services. **FATE** helps anyone who calls no matter what the issue is about.

Unfortunately, the need for advocacy nationwide has not waned over

the past 40+ years. In California alone, last year there were over 16,000 complaints filed against nursing homes. When **FATE** began its advocacy, complaint filings were about 5-7,000 per year. As the long-term care industry grew and expanded, unfortunately, so did complaints of poor care and abuse. As well, our case load helping family members with loved ones in long-term care facilities not requiring filing grievances with the state regulators also grew.

Conservatorship abuse also increased this past year. **FATE** continues to file administrative complaints regarding unscrupulous private fiduciaries who have done nothing but ruin families by over-charging for services, selling their properties below assessed value, isolating conserved elders from family members and friends, failing to oversee the care of the person conserved in order to assure proper care is being given, failure to notify

family members of the death of their loved one, not providing legal documents to interested parties when ordered by the court, etc., etc.

We did have numerous successes this year. One case involved an elderly woman who had sold her home to relocate to another state. Unfortunately, when she instructed the title company to wire her net proceeds, she omitted a zero from her account number and the \$70,000 went to someone's account and not hers. For over 5 months, she and the title company's corporate counsel were unable to get the funds into her account, which caused her extreme stress and anxiety. **FATE** was contacted for assistance and within a couple of weeks after **FATE** contacted the office of the CEO of Chase Bank in New York, the money was in her account.

Another situation involved a consumer who was looking into moving to an assisted living facility. She was told she had to give a \$6,000.00 deposit to hold the unit prior to even signing an admission agreement. The next day, she decided she would not move into this



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JUSTICE MATTERS

Years ago, two California psychiatrists were arrested and charged with Medicare fraud by the U. S. Attorney for going into skilled nursing homes at night and doing what was referred to as “gang visits” by giving so-called psych evaluations to nursing home patients without any authorization or family knowledge and then billing Medicare hoping no one would find out. They were arrested and sent to Federal prison for their crimes of Medicare fraud. At the same time, the operator of the nursing home was also charged with Medicare fraud and he too ended up in Federal prison. During the same time period, a facility medical director was also arrested and charged with Medicare fraud for billing for services not provided, i.e., patient exams that were not being given.

Recently, a **FATE** client found a notation in his uncle’s chart of a similar event...an evaluation by a psychiatrist without any authorization from the nephew who holds his uncle’s power of attorney. **FATE** filed an official complaint regarding the fraud and the psychiatrist was barred from practicing at the nursing home. As of the date of this publication, criminal charges have yet to be filed.

A Registered Nurse in Oregon was suspected of stealing patients’ drugs and only after **FATE** filed an official complaint regarding his actions, was he arrested. He pled guilty and was sent to Federal prison. He had moved across country from state-to-state for reasons unknown. It was highly suspected that he had been stealing patients’ medications in other facilities where he worked but he was never charged or arrested in other states.

The latest public interest lawsuit filed by **FATE** is entering the final stage of the court ordering the CA Department of Public Health to report how the department is investigating complaints against nursing homes to **FATE’s** law firm, the Lexington Law Group in San Francisco. History shows that about every 10 years, **FATE** has had to file such actions against the department for its on-going failures to serve the public as mandated by law. **FATE** developed its own database for tracking the complaints we file so we do not have to rely on the state’s data to determine if the department is out of compliance. We continue to monitor our complaints and hopefully, we will not have to file another public interest lawsuit in the future.

CA Attorney General Rob Bonita filed an unlawful business practices lawsuit against Sweetwater Care, an operator of 19 California nursing homes scattered throughout California. The



complaint alleges that Sweetwater committed over 25,000 violations of the state’s minimum staffing laws between 2020 and 2024. These violations led to injurious patient falls, fractures, pressure sores and terrible neglect. The complaint alleges chronic understaffing and includes allegations that the chain’s owners extracted tens of millions of taxpayer dollars directing payments to self-owned third party entities.

The CA Department of Public Health also issued nine Class A citations to the Rancho Seco facility for multiple incidents of a male certified nursing assistant (CNA) sexually assaulting at least nine known compromised patients. This CNA was hired by the facility despite management knowing he had a criminal history and was not licensed to work in a nursing home. **FATE** has since filed more administrative complaints against this facility for other regulatory failures.

The U. S. Department of Justice (DOJ) filed a False Claim Act case against Vohra Wound Physicians Management, one of the nation’s largest wound care providers. Vohra contracts with nursing homes across the country to provide wound care services to patients in nursing homes. DOJ allegations include Vohra hiring physicians without wound care expertise, setting care service targets based solely on revenue goals and

FATE’S MISSION

“Assuring our elders are treated with care, dignity and the utmost respect during their final years when they can no longer take care of themselves.”

SERVICES FATE PROVIDES

- Direct & On Site Advocacy
- Patient & Family Rights Advice
- Elderly Service Referrals
- Long Term Care Facility Evaluation

FATE’S GOALS

- Protect the elderly in their remaining years.
- Enhance national awareness of abuse in elderly care institutions.
- Initiate action to improve care.
- Report violations, malpractice and criminal actions to appropriate federal and state authorities.
- Follow-up to see that corrections and redress occur.
- Educate the public of their rights.

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President's Message

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complex. However, the facility refused to refund her the \$6,000.00 deposit. Her sister called **FATE** for assistance and we were able to get the entire amount refunded.

Another case involved a couple who had both been placed under a conservatorship. The man who is a Veteran was placed in a nursing home over 5 hours away from his spouse, which is not allowed when the consumer is under the MediCal system in California. A MediCal recipient cannot be moved anywhere that is out of a 30-mile radius from their home. **FATE** was successful in getting him out of the nursing home and sent home. After almost one year and **FATE's** continual advocacy, the couple was finally taken off conservatorship and are now happily living their lives. Getting someone off a conservatorship does not happen very often and is difficult to accomplish as the courts are extremely powerful and rarely let people out of an established conservatorship. However, **FATE** was determined to help this couple and stood up to the task to make it happen.

The pickleball craze also reached our office when we received a call from an elderly woman living in a senior complex who asked for our assistance. The complex is located next to a city-run park and the tennis courts were converted into pickleball courts. The seniors living in the complex were frustrated by the annoying sounds coming from the court, especially at night. **FATE** contacted a City Council Member and the matter was brought up to the Council and the city agreed to change the location of the pickle ball court to a different area of the park.

This past year, I personally did several podcasts, numerous television news programs and press interviews on

nursing homes, residential care facilities, assisted living, hospice care and conservatorship abuses. These podcasts, TV News programs and newspaper articles are important ways of alerting the public of abuses, how to deal with the situations and where to go to get help. We are also working on a docuseries regarding conservatorship abuse, which hopefully will be aired this coming year.

FATE continues to strive to be a strong voice for consumers and we will continue to serve the public with the same amount of commitment and dedication that we committed to over 40 years ago. **FATE** accepts no government funding, as we rely totally on donations from the public to run the organization. Thus, we appreciate our readers donating to our mission as the need for our advocacy continues to increase every year.

Many thanks to our loyal supporters this past year and to the **FATE** staff, especially Jane DeSoiza, Eileen Dancause and Harris Herman for their on-going dedication and commitment to serve our most vulnerable citizens and their families. 🌸

**“Our prime purpose in
this life is to help others.
And, if you can't help them,
at least don't hurt them.”**

- Dalai Lama

**“Justice delayed,
is Justice denied”**

*- British Prime Minister
William Gladstone, 1868*

Justice Matters

Continued from page 2

submitted “false claims” for services that were not medically necessary. It's bad enough that nursing home patients are suffering from facility caused pressure ulcers (bed sores), but to make money from that poor care is despicable and Vohra should be held accountable as well as the nursing home that causes patients to develop bed sores.

A groundbreaking Federal lawsuit was filed by Maryland nursing home patients claiming that the Maryland Department of Health violated their rights under the American with Disabilities Act by failing to conduct routine inspections and properly overseeing nursing home care. According to the complaint filed by the Public Justice Center and Justice in Aging, many facilities went years without inspections, leading to serious issues such as pressure ulcers, falls and infections. At the time the lawsuit was filed, some facilities had not been inspected for up to four years. The U.S. Senate found that nationwide, one in nine nursing homes had not been inspected for at least two years.

Plaintiffs allege that they were harmed by Maryland's delay in complaint inspections that often when done, resulted in “no violations” due to difficulties locating documents, staff turnovers or the subsequent discharge or death of patients. Lawsuits against states should not have to be filed if the regulators would do their job and enforce state and federal nursing home regulations. Consumers are urged to contact regulatory agencies in their state or call **FATE** to report abuse and poor care. Without proper monitoring and accountability, poor care, abuse and fraud will continue to harm our most vulnerable citizens. 🌸

Federal Regulations Strengthened for Use of Antipsychotics in Nursing Homes

Understaffed nursing homes that lack sufficient workers to provide hands-on care for nursing home patients have long been known to use antipsychotic medications to sedate patients rather than providing person-to-person hands-on interventions. For years, the Center for Medicare and Medicaid Services (CMS) has sought to reduce the use of antipsychotic medications, aka, chemical restraints. **FATE** participated with a stakeholder committee with the CA Department of Public Health and CMS to work on the reduction. After several years, evidence suggested that the decline in the use of antipsychotics was likely due to the exclusion of individuals with schizophrenia. As a result of this exclusion, facilities reported a steady increase in schizophrenia diagnoses. **FATE** found this to be not only alarming, but highly suspicious as to the sudden increase of nursing home patients having a diagnosis of schizophrenia.

CMS reported that while antipsychotic medications should not be used unless necessary to treat a specific condition, a diagnosis alone does not warrant the use of antipsychotics. There must be documentation that the facility attempted behavioral interventions and that interventions were deemed inappropriate or unsafe for the patient. There must be an informed consent form signed by the patient or the patient's decision maker prior to any antipsychotic medication being administered to any patient. The most used antipsychotic medication is Seroquel, followed by Zyprexa, Abilify, Risperidone, Haldol and Clozapine, which has the strongest side effects. Prior to ever consenting to use these mind-altering medications, consumers should read up on the drug and discuss the adverse side-effect with the pharmacist as they are the ones that studied pharmacology and know best about the adverse side effects. 🌸

World's Oldest Known Nursing Home Discovered

Archaeologists in Israel have uncovered a 1,600-year-old-Christian care facility for the elderly. A remarkable find that may be the world's oldest nursing home. The news was reported by Israel's news agency TPS-IL and announced by the University of Haifa in August of 2025. The care facility was found in the ruins of the ancient city of Hippos near the Sea of Galilee. The city was a significant bishop's seat in the region during the Byzantine era. While excavating the

ruins, archaeologists from the University Zinman Institute of Archaeology were struck by a floor design at the entrance of the ancient building inside one of the city's residential blocks. The mosaic's message read "Peace be with the Elders" in Koine Greek. Archaeologists are convinced that the building was a designated facility for older residents. During this period, life expectancy was around 35 years old. 🌸

What Do You Think?

When a nursing home operator gets cited for violations of Federal nursing home regulations, civil penalties may be assessed. In some states, a portion of the monetary penalty is returned to the department that monitors the nursing home operations in the state where the complaint was filed. The money is placed in a special fund that allows the nursing home operators to apply for a Grant to be used to improve patient care. Is that happening? Yes, it is. However, based on **FATE's** research, we found that millions of dollars in grants have been awarded to nursing home operators who have

violated nursing home regulations. Doesn't make sense or seem logical to allow the industry to get additional tax dollars when regulations are violated causing patients to be harmed. In some states, **FATE** found operators were using the Grant funds to pay for repairs to the building, which are considered capital improvements. The Grants are intended to be used to deliver better care, proper nutrition and more staffing for the benefit of the patients, not to benefit nursing home operators' property investments. What do you think? 🌸

Nursing Home Industry Systematically Scamming Taxpayers

Hindenburg Research, a group that specializes in forensic financial research, issued their annual report detailing a series of alleged billing fraud and reporting deceptions perpetrated by PACS Group, a newly publicly traded company that runs Providence Healthcare, owner of the largest nursing home chain in California. Providence owns about 140 nursing homes in California, which is approximately 12% of all nursing homes in California even though state law prohibits any entity from owning more than 10% of facilities. The report details a series of alleged billing fraud and reporting deceptions perpetrated by the PACS Group, all in service of building extraordinary profits. The report details six troubling concerns of possible fraud, deception and profiteering that may merit civil and criminal investigations. Former PACS employees told Hindenburg investigators that therapies, misleading 5-star ratings, staffing fraud and the abuse of a federal COVID waiver used to generate well over \$100 million in taxpayer-funded services. The report also states the PACS co-founders sold \$656.5 million in stock since the company's IPO in April of 2024 and estimates that they have cashed out approximately \$1 billion since the beginning of COVID. Also, the co-founders have bought luxury property, private jets and an affiliation with various Utah-based sports teams. If you suspect fraud occurred while you or a loved one were in one of PACS nursing homes or any other nursing home, report your suspicions directly to MediCare or call **FATE** and we will assist you with filing a complaint. 🌸

"All that is necessary for the triumph of evil is for good men to do nothing."

*- Edmund Burke
Irish Statesman and Author*

"Elder abuse is like child abuse, except the victims never grow up to testify."

- American Journalist, Brett Arends.

Sweetwater Chain Charged with Staffing Violations and Sexual Abuse

CA Attorney General Rob Bonita filed an unlawful business practices lawsuit against Sweetwater Care, an operator of Nineteen California nursing homes scattered throughout California. The complaint alleges that Sweetwater committed over 25,000 daily violations of the state's minimum staffing laws between 2020 and 2024, which led to injurious patient falls, fractures and pressure sores and terrible neglect. Not only did the complaint allege chronic understaffing, but also includes allegations that the chain's owners extracted tens of millions of taxpayer dollars directing payments to self-owned

third party entities. Sweetwater engaged in a systemic chain-wide business practice of understaffing that prioritized facility acquisitions, growth and profit at the expense of compliance with their promises to patients and California laws.

Sweetwater's facility, Rancho Seco, located in Galt, CA was recently issued nine Class A citations by the CA Department of Public Health for multiple incidents of a male certified nursing assistant (CNA) sexually assaulting at least nine known compromised patients. The CNA had been hired by Sweetwater despite knowing of his prior criminal

conviction for battery. The facility was cited for failing to prevent the sexual assaults, employing a CNA with a criminal history and failing to thoroughly investigate and immediately report allegations of sexual abuse. Each of the nine separate citations had a fine of \$25,000.00 each totaling \$225,000.00. However, **FATE** questioned this amount as same violations that occur during a 12-month period warrant trebling (3 times the original amount) the fine. **FATE** calculates the fine to be \$625,000.00 and has issued a concern as to why the State Department of Public Health did not treble the fines. 🌿

LONG-TERM CARE FACILITY COMPLAINTS

One of FATE's services is filing complaints with the state regulator agencies on behalf of patients and residents in a nursing home, assisted living facility, residential care home or acute care hospital. Although we get complaints on a daily basis, some do not result in an actual filing with the state regulators. Over the past several years, FATE has averaged four to six complaints a month. Although a prompt response is required, state agencies can extend the process for years. Some complaints FATE files do result in the appropriate state department citing these facilities for violations of federal and state regulations. The following are results from some of those complaints:

ARBOR POST ACUTE...Chico, CA...Federal Deficiencies...failure to ensure patient was provided with the necessary care to prevent an avoidable fall with injuries; failure to protect patients from abuse when patient had a fall resulting in a broken right ankle and the LVN was too busy to dispense pain medications to patient; failure to ensure administration of pain medications as ordered by the physician, which negatively impacted the patient's physical and emotional well-being and failure to report an unusual occurrence within 24 hours to the CA Department of Public Health regarding the fall and injury, which delayed regulatory oversight of the facility's practice in preventing falls which had the potential to result in more patient falls with major injuries.

CALIFORNIA POST ACUTE...Los Angeles, CA...Federal Deficiencies...failure to develop and implement a care plan for nutrition; failure to evaluate the nutritional and hydration needs as ordered by the physician; failure to evaluate patient's nutritional needs regularly and failure to provide adequate staffing. These deficient practices had the potential of great risk and harm to the patient. Note that this patient is under public conservatorship and the court-appointed conservatorship failed to monitor the patient's care in this facility to prevent harm.

CAPISTRANO BEACH CARE CENTER...Dana Point, CA...Two Federal Deficiencies...facility failed to ensure the responsible party was informed in advance of the care that was going to be

provided and the type of provider who would be furnishing the care and failure to ensure the quality of care and services were provided to the patient when the facility failed to monitor the patient for hypotension, failure to collect urine samples in a timely manner and failed to ensure results of the tests were promptly reported to the patient's physician...These failures posed the risk of patient's responsible party to not being able to make the informed decisions for the patient's care regarding a psychiatric evaluation performed on the patient with no authorization, which did not allow the patient to receive the necessary care and services to maintain their highest physical well-being.

COUNTRY CREST POST-ACUTE...Oroville, CA...Federal Deficiencies...failure to ensure patient received wound preventative measures as ordered to prevent skin break-down, promote circulation and provide pressure relief resulting in patient sustaining pressure ulcers (bed sores), which had the potential to lead to complications including pain, discomfort and infection. **FATE** filed an appeal as all allegations regarding this complaint were not investigated and CA Title 22 regulations should have been issued with a monetary fine because the patient was harmed.

HOLIDAY MANOR CARE CENTER .. Canoga Park, CA...Federal Deficiencies...**FATE's complaint resulted in a 34-page summary of federal violations and a Class B Citation. Federal deficiencies** issued for failure to notify physician and resident's family regarding the formation of

a pressure ulcer; failure to ensure a neurological assessment was completed after an unwitnessed fall; failure to ensure that two layers of linen was used for a low air loss mattress to help heal and prevent pressure sores; failure to ensure staffing information was posted daily; failure to obtain a physician's order prior to applying zinc oxide cream to prevent and/or treat pressure sores; failure to ensure patient was free of unnecessary psychotropic medications by failing to summarize a patient's monthly behavior and side effects summary; failure to promptly notify physician of a result of an x-ray resulting in a delay of necessary care and treatment; failure to maintain complete and accurate medical records. These deficient practices had the potential to negatively affect the delivery of care and services to the patients. **Class B Citation with a \$3,000.00 civil penalty...**facility failed to ensure staffing of actual hours worked by licensed and unlicensed nursing staffing was posted daily which violation had a direct relationship to the health and safety or security of all the residents in the facility.

KAISER FOUNDATION HOSPITAL, South Sacramento, CA...Deficiencies...hospital failed to ensure the protection of patient rights when patients were not given their rights to appeal the hospital's decision to discharge a MediCare patient and failure to follow policy and procedures to initiate and document restraint use, which had the potential to put patients at risk for harm.

Long-Term Care Facility Complaints

Continued from page 5

MOUNTAIN MANOR RESIOR RESIDENCE, Carmichael, CA...Deficiency...facility failed to ensure care and treatment in accordance with the professional standards of practice by not thoroughly documenting all aspects of IV therapy, not documenting medication orders, start and end times of IV bags including IV bolus administration, which failures had the potential to result in fluid hydration treatment not being met affecting the patient's highest practicable well-being.

PALM GARDENS...Woodland, CA...Class A Citation...\$10,000.00 Civil Penalty...the facility negligence resulted in resident sustaining a pressure injury (bed sore). The resident also suffered multiple falls while in care. Staff did not properly reposition the resident as required to prevent pressure ulcers. The staff also did not meet the resident's bathing needs .and did not provide sufficient staffing to meet the needs of the residents. An immediate civil penalty was assessed in the amount of \$500.00. An additional investigation was initiated resulting in an additional fine of \$9,500.00 due to the seriousness of bodily harm to the patient resulting in hospitalization.

RANCHO SECO CARE CENTER, GALT, CA...9 Citations...\$25,000 civil penalty per citation (\$225,000.00)...facility failed to protect patients' rights to be free from sexual abuse by a staff member when a Certified Nursing Assistant (CNA) sexually assaulted nine cognitively impaired patients, which caused the patients to be fearful, anxious, unable to sleep and put them at risk for long term psychosocial trauma such as social isolation, emotional instability, post-traumatic stress disorder and suicidal risks. Facility failed to protect the patients from sexual abuse and the potential to affect all patients in the facility when the facility knowingly employed the CNA with a history of a criminal misdemeanor , which led to the CNA sexually assaulting 9 patients; facility failed to report immediately to the Department of Public Health the allegations of sexual abuse within

two hours of the occurrence, which decreased the facility's potential to protect vulnerable patients and provide a safe environment. This complaint was not filed by FATE, but egregious enough to list in our newsletter.

SALLY'S RESIDENTIAL CARE HOME #3, Camarillo, CA...Deficiency...facility altered a monthly check made out to Sally's when a new operator took over the facility and altered the Payee from Sally's to Sunshine Residential Care. The Power of Attorney for the resident notified the Bank, which in turn notified the police. The new owner was issued a deficiency for altering the check. Other complaints have been issued against this facility now known as Sunshine Residential Care as no required Admission Agreement has been executed by one of the resident's Power of Attorney. The California Community Care Licensing Division that licenses residential care homes has yet to address the issue of a resident residing in this facility whereby a required Admission Agreement has never been executed.

SANTA PAULA POST ACUTE CENTER, Santa Paula, CA...Federal Deficiency...facility failed to ensure patient's assessments were performed by a registered nurse (RN) to meet professional scope and standards of practice. The failure had the potential to place the patient at risk of not being assessed appropriately and potentially resulting in harm to the patient.

SIERRA RIDGE SENIOR LIVING, Auburn, CA...Class A Citation...\$500.00 civil penalty assessed. The facility failed in the care of the resident resulting in the development of a state 4 pressure injury (decubitus ulcer) by failing to provide adequate care and supervision or wound care, did not consistently reposition the resident or give resident timely medical attention, which contributed to the resident's decline, subsequent admission to hospice care and eventual death. This complaint was initially filed by the resident's husband.

TURLOCK NURSING AND REHABILITATION CENTER, Turlock, CA...Two (2) Federal Deficiencies. Facility failed to notify responsible party of a significant change of condition

when the patient returned to the facility after a 7-day stay in an acute hospital and facility staff noted new areas of skin breakdown; failure to implement their policy on patient possessions when the facility failed to return the patient's personal belongings when a 42-inch television was not returned to the family. **These findings will be contested as the patient developed the worse bed sores ever seen by FATE in it's 40+ years of advocacy work, which contributed to the patient's death.**

UNLICENSED RESIDENTIAL CARE HOME...8657 Oak Avenue, Orangevale, CA...substantiated. FATE filed a complaint after receiving a call from a consumer about the poor care in this home in Orangevale, CA. FATE discovered this home to not have a license to operate a care home. The state regulators could not issue violations because there had been no license issued. The owner was given 15 days to apply for a license or move the other residents out of the facility. The owners did apply for a license, which the state regulators had not issued as of the date of this publication.

VILLAGE AT RANCHO SOLANO...Fairfield, CA...Class A Citation and two Class B Citations...\$500.00 civil penalty assessed...Class A Citation was issued for insufficient staffing as the facility failed to have a sufficient number of staff and competent staff to meet the needs of the residents; Class B Citations were for failure to provide written notice within two business days of a rate increase and failure to provide copies of reports for residents elopements from the facility, which posed a potential risk to the personal rights and safety of the resident.

WESTMONT TOWN COURT...Escondido, CA...Three (3) Class B Citations...facility failed to provide all requested patient records to the responsible party, failed to provide the correct name of the patient when admitted to an acute hospital and failed to use language cards for the patient whose primary language was not English, all of which posed an immediate health and safety risk to the patient.

DONATE TO OUR CAUSE

Again this year, problems in long-term care facilities, acute hospitals, assisted living facilities, and residential care homes were on-going and our work load continued to increase. Yet we stayed on our path to serve the most vulnerable and their families. We hope that you will consider donating to our most-worthy and much needed cause. FATE takes no government money and relies solely on the public for tax deductible donations. Our services are in great demand and we need your support to continue to serve. Make a donation by using the enclosed FATE envelope or go to www.4fate.org and donate via Pay Pal.

Your tax-deductible contribution will certainly be appreciated.

SPECIAL THANKS TO OUR DONORS

Gifts received from October 2024 to publishing date.

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