

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055052	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/11/2026
NAME OF PROVIDER OR SUPPLIER California Post-Acute Care		STREET ADDRESS, CITY, STATE, ZIP CODE 3615 E. Imperial Hiwy Lynwood, CA 90262	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Based on observation, interview and record review, the facility failed to maintain a sanitary environment in the kitchen, by failing to: Ensure the kitchen utility room was not dirty and free from clutters and debris (litter). Ensure there was no pooling (accumulation) of dirty water and debris under the manual washing station (where kitchen staff wash the dishes using hands) and sanitizing station (a designated area or portable unit equipped with supplies to clean, disinfect, and sanitize hands or surfaces to prevent the spread of germs and diseases). These failures had the potential to result in the growth of harmful bacteria and cross contamination (transfer of harmful bacteria from one place to another), that could lead to foodborne illnesses to residents who received food from the facility. Findings: During a concurrent observation and interview on 3/10/2026 at 11:50 a.m., with Dietary Aid (DA) 1, DA 1 stated there was dirty water and debris under the manual washing station and sanitizing station. DA 1 stated the sanitizing station had been leaking for several weeks (dates not specified). The maintenance personnel had checked it and fixed it (sanitizing station) but there were still spills from the water pressure. The kitchen utility room was dirty and did not have the chance to clean and organize it. The utility room should always be kept clean. DA 1 stated having dirty, standing water in the kitchen utility room could attract bugs like roaches which could cause cross contamination (transfer of harmful bacteria, viruses, or allergens from one surface, food, or person to another) and can cause illness on the residents eating food served from the kitchen. During a concurrent observation and interview on 3/10/2026 at 3:15 p.m., with the Dietary Cook, Dietary [NAME] stated the sanitizing station still had dirty, standing water and debris under and there was no point in cleaning under the sanitizing station because water kept pooling. The Dietary [NAME] stated the sanitizing station had already been cleaned and did not know where the standing water came from. The staff were supposed to remove all the food wastes in the sink strainer to keep it clean after washing the dishes to keep away bacteria, roaches and rodents. During a review of the facility's Policy and Procedures (P&P) titled, Sanitation, dated 5/30/2024, the P&P indicated all equipment shall be maintained as necessary and kept in working order. The Maintenance Department will assist Food & Nutrition Services (FNS) as necessary in maintaining equipment and in doing janitorial duties which the Food & Nutrition Services employees cannot do. The FNS Director will write the cleaning schedule in which he designates by job title and/or employee who is to do the cleaning task.</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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to maintain a clean, safe and sanitary environment, by failing to: Ensure Closets A, B, and C were kept cleaned and maintained in good working condition. Ensure 1 of 3 residents (Resident 1) room (room [ROOM NUMBER]), was free of spoiled and moldy food. Ensure rooms [ROOM NUMBERS] were clean and did not have dirty, pooled (accumulated) water in the basins. These deficient practices led to Resident 1 feeling dehumanized and caused the affected residents to live in an unsanitary environment and had the potential to cause infections, sickness and pests infestations. Findings: During a review of Resident 1's admission Record, the admission Record indicated Resident 1 was admitted to the facility on [DATE] with diagnoses including muscle weakness and hypertension (high blood pressure.) During a review of Resident 1's History and Physical (H&P) dated 2/3/2026, the H&P indicated Resident 1 had the capacity to make decisions. During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool) dated 2/8/2026, the MDS indicated Resident 1 was able to understand and be understood by others. The MDS indicated Resident 1 required set up assistance (Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity) for eating, oral hygiene, and moderate assistance (helper does less than half the effort. Helper lifts, holds, or supports trunk or limbs, but provides less than half the effort) for toileting hygiene, shower/bathe self, lower body dressing. Resident 1 required supervision (Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently) with upper body dressing and personal hygiene. Resident 1 required supervision with rolling from left to right, and moderate assistance from sitting to lying position, lying to sitting on side of the bed, sitting to stand, chair/bed to chair transfer, toilet transfer, tub/shower transfer and walking 10 feet. During a concurrent observation and interview on 3/10/2026 at 1:02 p.m., with Maintenance Director, the Maintenance Director stated Closet A had broken baseboards (a narrow wooden board running along the base of an interior wall), cluttered floor, dirty sink and floors. Closet B had multiple employee files and boxes on the dirty floors. Closet C was dirty and full of debris. room [ROOM NUMBER] had dirty floors and a dirty restroom with towels on the floor. rooms [ROOM NUMBERS] had a shared restroom with dirty basins full of dirty water and dirty small towels. Baseboards were detached. The Maintenance Director stated that he did not know when the last time Rooma 1, 2 and 3 were cleaned. The Maintenance Director stated the files should not be on the floor. The Maintenance Director stated he was supposed to get a cabinet to organize those documents but had not received authorization from the corporate office. It was important to keep the facility clean and in good condition because the residents could trip over the detached baseboards and the groves (small wood) and cracks could be an entry point for roaches. During a concurrent observation and interview on 3/10/2026 at 1:37 p.m., with Resident 1, Resident 1 stated her room, and restroom had not been cleaned in four days, and is dirty. There are bugs in her room, pointing at ants crawling on the drawer. Resident 1 stated she felt dehumanized being in such a dirty room. During a concurrent observation and interview on 3/11/2026 at 8:07 a.m., with Resident 1 stated her armoire (cabinet) had stains on the bottom area where she placed her clothes. There was a tray of food (hamburger and moldy fries) in the dresser drawer on the left side of her bed and multiple cups because staffs did not want to pick them up and she did not like to have them everywhere. During a concurrent observation and interview on 3/11/2026 at 8:42 a.m., with Infection Prevention Nurse (IP), the IP stated having old moldy food in the drawers could lead to infections and sickness and could attract pests. The IP stated the housekeeper should check and clean the armoire and dressers daily. During a concurrent observation and interview on 3/11/2026 at 9:12 a.m., with Certified Nurse (CNA 2), CNA 2 stated she did not know how long the nine piled basins (continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>with dirty water and yellowing towels have been under the sink in restroom for Rooms 2 & 3, but it should have been removed and cleaned and not kept there. During a review of the facility's Policy and Procedures (P&P) titled, Sanitation, undated, the P&P indicated the Maintenance Department will assist Food & Nutrition Services (FNS) as necessary in maintaining equipment and in doing janitorial duties which the Food & Nutrition Services employees cannot do. The P&P indicated the FNS Director will write the cleaning schedule in which he designates by job title and/or employee who is to do the cleaning task. During a review of the facility's P&P titled, Homelike Environment, dated 1/2018, the P&P indicated the facility should provide residents a safe, clean, comfortable and homelike environment.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>Based on observation, interview, and record review, the facility failed to maintain an effective pest control program. This failure had the potential for pest infestation in the building affecting 121 of 121 residents at the facility. Findings: During a review of pest control service report dated 3/4/2026, the report indicated that entry, the baseboard (a narrow wooden board running along the base of an interior wall) on the right side of the door was peeling/damaged, serving as a potential entry point and harborage area for roaches. The report indicated pest control recommendations, including to seal the peeling baseboards on the right side of the door entry to eliminate harboring area and utility room, maintain high sanitation standards, ensuring no food, particles or water leaks, persist around the kitchen appliances to prevent or worsen any signs of infestation, including patient rooms, which may attract roaches causing them to venture into those rooms. During a concurrent observation and interview on 3/10/2026 at 1:02 p.m., with Maintenance Director, the Maintenance Director stated Rooms 2, and 3 shared restrooms had detached baseboards. The Maintenance Director stated cracks could lead to entrance points for roaches. During a concurrent observation and interview on 3/10/2026 at 1:37 p.m., with Resident 1, Resident 1 stated her room, and restroom had not been cleaned in four days, and is dirty. There are bugs in her room, pointing at ants crawling on the drawer. Resident 1 stated she felt dehumanized being in such a dirty room. During a review of the facility's Policy and Procedures (P&P) titled, Pest Control, dated 1/2026, the P&P indicated the facility should maintain an on-going pest control program to ensure that the building is kept free of insects and rodents.</p>		