

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055307	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/03/2025
NAME OF PROVIDER OR SUPPLIER Desert Canyon Post Acute, LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 1642 West Avenue J Lancaster, CA 93534	

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 0627</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.</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 0627</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to ensure the facility did not transfer or discharge a resident in an unsafe manner for one of three sampled residents (Resident 1) when Resident 1 was transferred to recuperative care (a short-term, supportive housing program for people experiencing homelessness who are recovering from an illness or injury but are not sick enough to need a hospital anymore) prior to confirming recuperative care would accept Resident 1. This deficient practice resulted in Resident 1's admission to the hospital after recuperative care did not accept Resident 1's transfer. Findings: During a review of Resident 1's admission Record, the admission Record indicated the facility initially admitted Resident 1 on 7/15/2025, and readmitted on [DATE], with diagnoses including Guillain-Barre Syndrome (a condition where the body's immune system mistakenly attacks its own nerves, causing weakness, tingling, and sometimes paralysis) and hypertension (high blood pressure). During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated 7/17/2025, the MDS indicated Resident 1 had no impairment with thought processes and required partial assistance from staff to complete activities of daily living (ADLs - activities such as bathing, dressing and toileting a person performs daily). During a review of Resident 1's Psychosocial Assessment/Social History/Discharge Planning, dated 7/17/2025, Psychosocial Assessment/Social History/Discharge Planning indicated Resident 1 will be discharged back to recuperative care when discharged from the facility. During a review of Resident 1's Progress Notes, dated 10/3/2025, the progress notes indicated the Outside Social Service Worker (OSSW) found placement at a recuperative care for Resident 1 and would like to discharge Resident 1 on 10/8/2025 at 11 a.m. The progress note indicated Resident 1 was made aware and Resident 1 agreed. During a review of Resident 1's Progress Notes, dated 10/8/2025, at 10:00 a.m., the progress notes indicated Resident 1 was discharged from the facility at 9:50 a. m. via transportation with all his medications and belongings. During a review of Resident 1's Progress Notes, dated 10/8/2025, at 11:23 a.m., the progress notes indicated the OSSW informed the facility that Resident 1 was not accepted in recuperative care due to Resident 1's medical condition. The progress notes indicated the facility informed the OSSW that Resident 1 had already left the facility and was on the way to recuperative care. The progress notes indicated the OSSW stated that she called Resident 1 already and offered to help the resident to be placed at a motel or a shelter, but Resident 1 refused. During an interview on 10/15/2025 at 9:48 a.m. with Resident 1, Resident 1 stated that after leaving the facility, the OSSW called and informed Resident 1 that recuperative care will not accept Resident 1 due to his medical condition. Resident 1 stated that after receiving the call from OSSW he came back to the facility parking lot and asked the facility to help him to talk to the OSSW. Resident 1 stated that transportation came in again and he left the facility accompanied by the Assistant Social Worker (ASSW) and dropped him off at the hospital. Resident 1 stated the ASSW did not check him and left Resident 1 in the parking lot in front of the hospital. Resident 1 stated he walked himself to emergency room from the parking lot. During an interview on 10/15/2025 at 10:33 a.m. with the ASSW, the ASSW stated the facility received a call from the OSSW informing the facility that recuperative care was not taking Resident 1 due to his medical condition. The ASSW stated that Resident 1 was aware and was already on the way back to the facility. The ASSW stated that the OSSW suggested to transfer to a few places, but Resident 1 refused and the OSSW suggested the hospital and Resident 1 agreed. The ASSW stated that she accompanied Resident 1 to the hospital, helped Resident 1 to unload all his belongings from the transportation, and left Resident 1 in front of the hospital parking lot. The ASSW stated that she left when Resident 1 was already walking inside and talking to someone from the hospital. During an interview on 10/15/2025 at 11:08 a.m. with Social Service Worker (SSW) 1, SSW 1 stated that Resident 1 was already discharged from the facility and SSW 1 received a call from the OSSW that Resident 1 will not be accepted into recuperative care due to Resident 1's medical condition. SSW 1 stated Resident 1 returned to the facility and Resident 1 was upset and wanted to talk to the OSSW. SSW 1 stated that the facility called the OSSW for Resident 1 and the OSSW offered a board and care or a motel, but Resident 1 refused. SSW 1 stated Resident 1 wanted to go to the streets, but the OSSW offered the hospital and Resident 1 agreed. SSW 1 stated that the ASSW accompanied Resident 1 to the hospital. During an interview on 10/15/2025 at 11:36 a.m. with the Administrator, the Administrator stated Resident 1 wanted to be in the streets and refused to go back in the facility. The Administrator stated that the OSSW offered the hospital and Resident 1 agreed to be sent to the hospital. During an interview on</p>		