STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055402	A. Building B. Wing	12/02/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
River City Post Acute	2540 Carmichael Way Carmichael, CA 95608

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)
F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. (continued on next page)

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Based on observation, interview, and record review, the facility failed to accommodate the exercise of resident/resident representative's rights for one out of 11 sampled residents (Resident 5) when facility did not respond timely to Resident 5's representative request of Resident 5's personal belongings.This failure resulted in Resident 5 not having access to his personal belongings and had the potential for Resident 5 to experience undignified existence. Findings:A review of Resident 5's clinical record indicated Resident 5 was admitted May of 2025 and had diagnoses that included dementia (impairment of the ability to remember, think, or make decisions that interferes with everyday activities), epilepsy (a disorder in which nerve cell activity in the brain is disturbed, causing seizures), and major depressive disorder (persistently depressed mood or loss of interest in activities, causing significant impairment in daily life).A review of Resident 5's clinical records indicated Resident 5 was discharged from the facility on 9/5/25.During a phone interview on 12/1/25 at 2:17 p.m. with Resident 5's sister (RP 5), RP 5 stated she had been requesting Resident 5's personal belongings, but the facility had not responded to her and have not updated her with the status of her request.During an interview on 12/2/25 at 12:01 p.m. with the Social Services Director (SSD), the SSD stated they would always accommodate a family's request of the resident's personal belongings after the resident's discharge. The SSD further stated he would usually document on the resident's chart that the resident's personal belongings were requested and were picked up or were sent to the family.A review of Resident 5's document titled, INVENTORY OF PERSONAL EFFECTS, dated 5/5/25, indicated Resident 5 had 2 jackets, 1 pajama, a pair of shoes, a pair of shorts, 5 pairs of pants, 10 socks, 6 pairs of underwear, 2 books, 1 notebook, and 2 pictures among with his other personal items when he was admitted to the facility. A review of Resident 5's clinical records did not indicate that Resident 5's personal belongings were provided back to Resident 5 or to his family after Resident 5 was discharged from the facility.During a concurrent interview and record review on 12/2/25 at 3:35 p.m. with the SSD, Resident 5's clinical records were reviewed. The SSD confirmed that Resident 5's personal belongings were provided back to Resident 5 or to his family after Resident 5 was discharged from the facility. The SSD stated the Business Office Manager (BOM) contacted him on 11/19/25 and told him that Resident 5's family was requesting Resident 5's personal belongings. The SSD also stated he had not contacted Resident 5's family regarding their request up to this date. The SSD further stated he will need to double check if Resident 5's personal items are still in the building.During a concurrent observation and interview on 12/2/25 at 3:50 p.m. with the SSD of the hall 1 storage room, the SSD stated they would keep all resident's personal items in the storage room after the resident gets discharged . The SSD searched for Resident 5's personal items in the hall 1 storage room, but none were found.During an interview on 12/2/25 at 4:25 p.m. with the SSD, the SSD stated it was not okay that they had not responded to Resident 5's representative's request of Resident 5's personal belongings. The SSD also stated, .If there was a grievance, response should be [within] 72 hours . The SSD further stated that staff should always try to respond to the request and give them an update about their request as fast as possible.During an interview on 12/2/25 at 4:28 p.m. with the BOM, the BOM confirmed she had talked to Resident 5's sister via phone call on 11/18/25 and Resident 5's sister had requested Resident 5's personal belongings. The BOM stated she messaged the SSD about the request on the same day. During an interview on 12/2/25 at 4:43 p.m. with the administrator (ADM), the ADM stated staff would need to follow up with a resident's family request for the resident's personal belongings after the resident gets discharged . The ADM further stated, .I don't believe there's a time frame for that ., when asked what the facility's time frame was in responding to a resident's family's request.A review of the facility's policies and procedures (P&P) titled, Resident Rights, revised 12/2021, indicated, 1. Federal and state laws guarantee certain basic rights to all residents of this facility. These rights include the resident's right to: .u. voice grievances to the facility, or other agency that hears grievances, without discrimination or reprisal and without fear of discrimination or reprisal; .ae. retain and use personal possessions to the maximum extent that space and safety permit; .A review of the facility's P&P titled, Grievance/Concern, dated 8/25/21, indicated, All residents and/or their representatives may voice grievances/concerns .Center leadership will investigate, document, and follow up on all formal concerns and grievances registered by any resident or resident representative. Social Services personnel will serve as Resident advocates in the grievance/concern process .6. The department manager will: .6.1. Contact the person filing the grievance to acknowledge receipt .6.5 Notify the person filing the grievance of resolution and/or status within 72 hours .A review of the facility's P&P titled, Resident's Personal