

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 08/27/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055664	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/26/2026
NAME OF PROVIDER OR SUPPLIER York Healthcare & Wellness Centre		STREET ADDRESS, CITY, STATE, ZIP CODE 6071 York Blvd. Los Angeles, CA 90042	
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 0726 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure that one of three certified nurse assistants (CNA 1) maintained a valid certification while providing resident care. CNA 1's certification expired on [DATE], and the facility did not identify the expired status until [DATE]. As a result, CNA 1 provided resident care for 2 years, 6 months, and 4 days without a valid CNA certificate. This deficient practice had the potential to place residents at risk for harm, including inadequate care, neglect, and possible abuse due to the CNA 1 providing care without a valid certification. Findings: During a review of the facility's Monthly Schedule CNA Department from 1/2026 to 4/2026, the monthly schedule indicated that CNA 1 was scheduled to work at the facility five days weekly in 1/2026 and 2/2026. The schedule indicated CNA 1's last day of work was [DATE]. During a review of an untitled facility-provided document provided by the Payroll, the document indicated CNA 1's Employee Status was recorded as Active from [DATE] to [DATE]. The Document further indicated Change of Status on [DATE] with the reason listed as Non-Nursing, and a termination date of [DATE] with the reason indicated as Return to school. During a review of the L&C Verification (L&C) Detail Page (VDP-1) from California Department of Public Health (CDPH) dated [DATE] located in CNA 1's employee education and personnel file (EEPF), the VDP-1 indicated a CNA's nursing assistant certificate was expired on [DATE], however the VDP-1 was misplaced into CNA 1's EEPF and did not belong to CNA 1. During a review of CNA 1's L&C Verification Detail Page (VDP-2) from CDPH dated [DATE], located in CNA 1's EEPF, the VDP-2 indicated CNA 1's nursing assistant certificate was expired on [DATE]. During a concurrent interview and record review on [DATE] at 11:43 AM with the Director of Staff Development (DSD), CNA 1's EEPF was reviewed. The DSD stated that CNA 1's certificate expired on [DATE]; however, CNA 1 continued working as a CNA at the facility until [DATE]. The DSD stated he discovered the issue on [DATE] while preparing to assist CNA 1 with her renewal, because the VDP-1 form in the EEPF indicated an expiration date of [DATE]. The DSD stated the certificate number listed on the first verification did not match CNA 1's original certificate. The DSD stated he was not the DSD at the time CNA 1's certificate expired in 2023 and, when he assumed the role in [DATE], he did not compare the certificate numbers on the VDP-1 with CNA 1's actual certificate during the EEPF review. The DSD stated he relied on the VDP-1 because the name appeared similar to CNA 1's and he did not review the VDP-2 or notice that CNA 1's actual certificate included a middle initial. The DSD stated VDP-1 with someone else's information was misplaced in CNAs 1's EEPF. The DSD further stated he did not know whether the previous DSD assisted CNA 1 with renewal or ensured she verified the completion of her renewal, since CNA 1 was responsible for maintaining her own certification. During an interview on [DATE] at 4 PM with the Director of Nursing (DON), the DON stated it was illegal to provide care to a resident as a CNA when the CNA's certificate was expired. The DON stated the care provided by CNA 1 to residents may not be adequate since CNA 1's certificate was expired and training hours and competency was not provided. During an interview on [DATE] at 4:29 PM with the Administrator (ADM), the ADM stated that she did not know that CNA 1's CNA certificate was expired. The ADM stated the DSD was supposed to compare and verify each (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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F 0726 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	CNA's initial certificate number and name upon certificate verification on the L&C Verification website to avoid confusion and mistakes. The ADM also stated since CNA 1 was working with an expired certificate, this posed a risk in resident care since CNA 1 was not up to date with proficiency and competency. During a review of the facility's policy and procedures (P&P) titled Hiring and Employment Verification revised on [DATE], the P&P indicated that for ongoing monitoring, all licenses and certifications will be verified prior to expiration. And the Director of Staff will maintain a tracking system to alert for renewals.		