

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

Printed: 07/18/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055764	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/21/2025
NAME OF PROVIDER OR SUPPLIER Whittier Pacific Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 7716 S Pickering Avenue Whittier, CA 90602	
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 0732 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Post nurse staffing information every day. Based on observation, interview and record review, the facility failed to ensure that accurate staffing information was posted in a visible and prominent place on a daily basis, as required by the facility's policy and procedure (P&P) titled Posting Direct Care Daily Staffing Numbers. This failure had the potential to prevent residents and visitors from being informed of the facility's accurate daily staffing levels. Findings: During an observation on 11/21/2025 at 10:23 AM the staffing information postings at both Skilled Nursing and Subacute Nursing stations were found to be not easily visible to residents who use wheelchairs. At the Skilled Nursing unit, the staffing information was posted approximately five feet above the ground making it difficult for wheelchair bound residents to view. Additionally, the information posted at both the Skilled Nursing and Subacute stations reflected projected staffing information rather than the actual staffing for each shift (7:00 AM - 3:00 PM, 3:00 PM - 11:00 PM, and 11:00 PM - 7:00 AM). Inaccurate data was noted on the following dates: -For 7:00 AM - 3:00 PM shift on 9/1/25, 9/2/25, 9/3/25, 9/4/25, 11/2/25, 11/4/25, 11/5/25, 11/6/25, 11/9/25, 11/17/25, 11/20/25. -For 3:00 - 11:00 PM shifts on 9/1/25, 9/2/25, 9/3/25, 9/4/25, 11/2/25, 11/4/25, 11/6/25, 11/17/25, 11/20/25. -For 11:00 PM - 7:00 AM shift on 9/2/25. During a concurrent interview and record review on 11/21/2025, at 12:35 PM with Director Staff Developer (DSD 1). The Daily Subacute Staffing Posting, dated 11/21/2025 was reviewed. The posting indicated the following staffing levels for the 7:00 AM - 3:00 PM shift: Registered Nurse (RN): 8 hours Licensed Vocational Nurses (LVNs): 32 hours Certified Nurse Assistants (CNAs): 45 hours. However, the corresponding Nursing Staffing Assignment and Sign-In Sheet reflected: 8 Registered Nurses 24 Licensed Vocational Nurses 45 Certified Nurse Assistants DSD 1 stated that the data entered on the Daily Subacute Staffing Posting was projected based on the previous day's schedule and had not been updated with the actual staffing data. DSD 1 further stated that staff members did not have access to update the posting and only DSD 1 was authorized to make changes. During a concurrent interview and record review on 11/21/2025, at 12:35 PM with Director Staff Developer (DSD) 1 the Daily SNF Staffing Posting, dated 11/21/2025 was reviewed. The Daily SNF Staffing Posting indicated that for the 7 AM - 3 PM shift, there were 0 hours for Registered Nurses, 24 hours for Licensed Vocational Nurses, and 96 hours for Certified Nurse Assistants. However, the Nursing Staffing Assignment and Sign-In Sheet indicated 8 Registered Nurses, 24 Licensed Vocational Nurses, 88 Certified Nurse Assistants. DSD 1 stated the data entered on the Daily SNF Staffing Posting was projected data based on the previous day's schedule and had not been updated with the actual staffing data. During a concurrent interview and record review on 11/21/2025 at 1:02 PM with DSD 1, the Policy and Procedure (P&P) titled, Posting Direct Care Daily Staffing Numbers, dated August 2022 was reviewed. DSD 1 stated DSD 1 they were responsible for updating and posting actual daily staffing numbers. DSD 1 stated the postings of staffing were based on projected data and not the actual data. The P & P indicated within 2 hours of the beginning of each shift, the number of licensed nurses (RNs, and LVNs) and the number of unlicensed nursing personnel CNAs directly responsible for resident care is posted in a prominent location (accessible to residents and visitors). The P&P further indicated the data should be easily seen and read by residents, staff, visitors or others who are interested. During an interview on November 21, 2025, at 3:25 PM, the Director of Nurses (DON 1) stated that the daily staffing posting (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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 055764
		If continuation sheet Page 1 of 2

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F 0732 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	should accurately reflect the actual staffing numbers rather than the projected hours. The DON stated this ensures accuracy regarding staff providing direct patient care, which is essential for residents, staff members, and visitors to access.		