STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055795	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Brighton Place San Diego	1350 N. Euclid Avenue San Diego, CA 92105

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, and record reviews, the facility failed to provide a homelike environment for three of eight sampled residents (2, 4, 6). This failure had the potential to have negative psychosocial (intersection between an individual's psychological state (thoughts, feelings, and internal mental health) and their surrounding social environment (relationships, cultural norms, and societal factors)) effects on residents living in the affected rooms.Findings:1. A review of the admission Record for Resident 2 indicated, the resident was admitted on [DATE] for diagnoses which included: Respiratory Failure (when your respiratory system cannot adequately supply oxygen to your blood or properly remove carbon dioxide from it) and Congestive Heart Failure (a chronic condition where the heart muscle becomes too weak or stiff to pump blood efficiently). A review of Minimum Data Set (MDS-a clinical assessment tool used in nursing homes; section C-Cognitive [thinking]) Patterns dated 4/4/26, indicated Resident 2 had a Brief Interview for Mental Status (BIMS) score of 13 of 15, indicating intact cognition (thinking processes). On 5/27/26 at 1:45 P.M. an observation of room [ROOM NUMBER] was conducted. room [ROOM NUMBER] was observed with eight quarter sized holes covered with spackle (a ready-mixed, putty-like compound used to fill small holes, dents, and cracks in walls), not sanded or painted. The foam guard covering the telephone wire on wall close to floor had two large rips across the foam could be a tripping hazard for residents. On 5/27/26 at 1:50 P.M., a concurrent interview with Resident 2 and observation of room [ROOM NUMBER] was conducted. Resident 2 was observed resting in bed watching TV. Resident 2 was alert, oriented, and agreeable to interview. Resident 2 stated the holes in the wall did not feel homelike to him and he would like them to be fixed. On 5/27/26 at 1:55 P.M., an observation of room [ROOM NUMBER]'s bathroom was conducted. The sink in bathroom was observed to have extensive water damage directly on the wall behind it, with peeling paint, no sealant, and the sink physically separating from the wall. The bathroom baseboard at its entrance had a large three-inch chunk missing from it. 2. A review of the admission Record for Resident 4 indicated, the resident was admitted on [DATE] for diagnoses which included: Hemiplegia (the loss of voluntary muscle control of one entire side of the body (left or right), which affects motor function, limbs, and sometimes the face) and Epilepsy (disorder characterized by recurrent, unprovoked seizures[a sudden, uncontrolled surge of abnormal electrical activity in the brain]). A review of MDS section C-Cognitive Patterns, dated 5/13/26, indicated Resident 4 had a Brief Interview for Mental Status score of 15 of 15, indicating intact cognition (thinking processes). On 5/27/26 at 2:05 P.M., an observation of room [ROOM NUMBER] and connected bathroom was conducted. room [ROOM NUMBER]'s wall beneath the window near Bed C had a 3x2 foot area repaired and with spackle but not sanded or painted. On far wall with a window, another 2x3 foot area with multiple tears in the wall from wheelchair approximately eight inches from the floor with varying degrees of repair with spackle, unsanded, and not painted. room [ROOM NUMBER]'s bathroom had a loud fan that sounded like loose blades moving around in the fan. On 5/27/26 at 2:10 P.M., an observation of room [ROOM NUMBER] was conducted. room [ROOM NUMBER] was observed to be a six-bedroom unit with three beds on either side of a dividing wall. (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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