

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

Printed: 10/09/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055799	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/31/2026
NAME OF PROVIDER OR SUPPLIER Vineyard Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1090 East Dinuba Avenue Reedley, CA 93654	
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 - Some	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 observation, interview and record review, the facility failed to provide a safe, clean, comfortable, homelike environment for four of six sampled residents (Residents 1, 2, 3, and 4) when the shared bathroom between the two rooms was in disrepair. This failure violated Resident 1, 2, 3 and 4's right to a comfortable and homelike environment that would respect the residents' dignity and well-being and placed Resident 1, 2, 3 and 4 at risk for injury. During a concurrent observation and interview on 7/31/26 at 1 pm, with Resident 1, Resident 1 demonstrated the disrepair of her bathroom. Resident 1 stated she had originally complained about her bathroom [ROOM NUMBER] days earlier and had complained many times since. When she pushed the toilet, it moved to the side. The caulking at the base was cracked and missing. There was a thick black substance around the base and in the corners. The bathroom wall was chipped. The linoleum floor was stained yellow and brown and was peeling. Resident 1 said she did not feel safe using her bathroom and had told staff many times. She said the Maintenance Director (MD) tried to fix it a few weeks ago, but the toilet was still missing caulking, loose, and was unsafe to use. Resident 1 said a commode (a chair-like device with a chamber pot for people who have trouble using a regular toilet) was put over the toilet, she believed, as a solution. During a review of Resident 1's Face Sheet (front page of the chart that contains a summary of basic information about the resident) and Brief Interview for Mental Status (BIMS -an assessment tool used by facilities to screen and identify memory, orientation, and judgement status of the resident), indicated Resident 1 has a BIMS score of 15, indicating no memory, orientation, and judgement impairment. During a concurrent observation and interview on 7/31/26 at 1:11 pm, with Resident 2, Resident 2 showed how the toilet seat on the commode slid when she sat down and got up. She said the sliding seat made her nervous. During a review of Resident 2's Face Sheet and BIMS, indicated Resident 2 has a BIMS score of 15, indicating no memory, orientation, and judgement impairment. During a concurrent observation and interview on 7/31/26 at 1:30 pm, with Resident 3, Resident 3 was sitting in room [ROOM NUMBER], in her wheelchair. Resident 3 stated she had had a stroke and needed help getting on and off the toilet. Resident 3 stated there was not enough room in the bathroom for her to get in with her wheelchair and showed the black scuff marks on both sides of the doorway to the bathroom. Resident 3 pointed out the pieces of wall chipped away in the bathroom from her wheelchair. Resident 3 stated she had trouble getting on and off the commode because it was too high for her. During a review of Resident 3's Face Sheet and BIMS, indicated Resident 3 has BIMS score of 9, indicating moderate memory, orientation, and judgement impairment. During a concurrent observation and interview on 7/31/26 at 1:40 pm, with Resident 4, Resident 4 was lying on her right side on her bed in room [ROOM NUMBER] and was tearful. Resident 4 stated she was in pain, needed help getting to the bathroom, and the commode was too high and it hurts her when she (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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	used it. During a review of Resident 4's Face Sheet and BIMS, indicated Resident 4 had a BIMS score of 11, indicating moderate memory, orientation, and judgement impairment. During a concurrent observation and interview on 7/31/26 at 1:45 pm, with the Director of Staff Development (DSD), the DSD stated she heard all the time that the facility needed to provide a homelike environment for the residents which meant things were in working order and clean. The DSD observed the bathroom shared by rooms [ROOM NUMBERS] and stated the toilet needed more caulking, the floor looked old and was peeling, the toilet moved, there was a black substance around the base, and the wall was chipped. The DSD stated the bathroom was not appealing or homelike. During a concurrent observation and interview on 7/31/26 at 2:09 pm, with Certified Nursing Assistant (CNA) 1, CNA 1 stated she worked with rooms [ROOM NUMBERS], and helped Resident 3 to the bathroom often. CNA 1 observed the bathroom between rooms [ROOM NUMBERS] and stated there was a black substance at the base of the toilet, stains on the floor, and it looked gross. CNA 1 stated she would not want a bathroom like that in her own home. During a concurrent observation and interview on 7/31/26 at 2:15 pm, with CNA 2, CNA 2 stated she worked with rooms [ROOM NUMBERS] a lot. CNA 1 stated Resident 1 had told her the bathroom was moldy and she heard a work order was put in. CNA 2 observed the bathroom shared by rooms [ROOM NUMBERS] and stated a grip strips (a piece of tape with texture to prevent residents' feet from slipping) was missing, the commode seat was not centered and the toilet base moved. CNA 2 stated the toilet was unsafe and the bathroom was not homelike. During a concurrent observation, interview and record review on 7/31/26 at 2:20 pm with the MD, the bathroom between rooms [ROOM NUMBERS] was observed and the facility Maintenance Logs dated 5/23/26 to 7/31/26 were reviewed. The Maintenance Log indicated that on 7/9/26 the toilet in the bathroom shared by rooms [ROOM NUMBERS] needed the caulking repaired and repair was done on 7/10/26. The MD stated he was told the toilet was loose and needed caulking and was replaced many parts on 7/10/26. The MD stated some caulking was still missing but it was only cosmetic. The MD pushed the toilet and it moved side to side. The MD stated the toilet was unsafe, but a new commode was put over the toilet for safety. The MD observed the position of the toilet seat on the commode and stated Resident 2 had told him of the seat sliding and he had gone into the bathroom and fixed it by sliding the seat back. The MD stated the seat slid because of the way the residents sat down and got up from the commode. The MD stated the commode did not meet residents' safety needs. The MD stated the floor was stained and old and needed cleaning. The MD stated the residents bathroom was not safe, clean, comfortable, or homelike. During an interview on 7/31/26 at 2:33 pm with the Housekeeper (HK), HK stated she did her best to clean the bathroom between rooms [ROOM NUMBERS] every day but it was very difficult because of the stained and peeling floor. HK stated she had told the MD that the toilet needed new caulking. During a concurrent observation, interview and record review on 7/31/26 at 2:55 pm, with the Licensed Vocational Nurse (LVN) 1, LVN 1 observed the bathroom between rooms [ROOM NUMBERS]. LVN 1 stated Resident 1 complained about the toilet and she saw it was already logged and repaired, so she didn't log it again. LVN 1 stated the bathroom looked like it needed to be cleaned, had dirt in the floor creases, needed new caulking, wiggled, and did not look safe. LVN 1 stated the bathroom was not homelike, sanitary and safe to use. During an interview on 7/31/26 at 2:33 pm with the Administrator (ADM), the ADM stated he knew the toilet needed fixing and the MD had fixed it so it no longer wiggled. The ADM stated he was ultimately responsible for making sure maintenance was completed correctly. The ADM stated he had not checked to see if the toilet had been repaired and was unaware it still wiggled. The ADM stated the facility was required to maintain the facility as they would maintain their home. During a review of the facility's Policy and Procedure (P&P) titled, Quality of Life - Homelike (continued on next page)		

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Environment, dated April 2014, indicated, Residents are provided with a safe, clean, comfortable and homelike environment.2. The facility staff and management shall maximize, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include: a. Cleanliness and order.c. Inviting colors and decor. During a review of the facility's P&P titled, Maintenance Service, dated December 2009, indicated, The Maintenance Department is responsible for maintaining the buildings, grounds, and equipment in a safe and operable manner at all times. Functions of maintenance personnel include, but are not limited to: a. Maintaining the building in compliance with current federal, state, and local laws, regulations, and guidelines. b. Maintaining the building in good repair and free from hazards. During a review of the facility's P&P titled, Resident Rights, dated August 2009, indicated, Employees shall treat all residents with kindness, respect, and dignity.I. Federal and state laws guarantee certain basic rights to all residents of this facility. These rights include the resident's right to.e. Voice grievances and have the facility respond to those grievances.		