

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: 055855	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/12/2026
NAME OF PROVIDER OR SUPPLIER Arden Park Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 3400 Alta Arden Expressway Sacramento, CA 95825	
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 - Some	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. Based on interview and record review the facility failed to ensure Licensed Nurses (LNs) had the knowledge, competencies and skill sets to provide care to residents prior to caring for residents on their own for nine of 13 sampled staff members when: 9 LNs did not have a completed competency checklist on hire. This failure resulted in the facility being unable to confirm LNs were competent prior to caring for residents and had the potential for residents in the facility to receive substandard care. During a concurrent interview and record review on 6/12/26, at 10:37 a.m. with Director of Staff Development (DSD), LN 1's employee file was reviewed. LN 1's employee file indicated, LN 1 did not have a complete competency checklist on hire signed by a Registered Nurse (RN). DSD stated, there was a competency checklist partially filled out by a Licensed Vocational Nurse, but it needs to be signed by an RN. During a concurrent interview and record review on 6/12/26, at 10:37 a.m. with DSD, LN 2's employee file was reviewed. LN 2's employee file indicated, LN 2 did not have a complete competency checklist on hire. DSD stated, she did not see a completed competency checklist in the employee file. During a concurrent interview and record review on 6/12/26, at 12:20 p.m. with Assistant Director of Nursing (ADON), LN 3's employee file was reviewed. LN 3's employee file indicated, LN 3 did not have a complete competency checklist on hire. ADON stated LN 3 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:22 p.m. with ADON, LN 4's employee file was reviewed. LN 4's employee file indicated, LN 4 did not have a complete competency checklist on hire. ADON stated LN 4 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:24 p.m. with ADON, LN 5's employee file was reviewed. LN 5's employee file indicated, LN 5 did not have a complete competency checklist on hire. ADON stated LN 5 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:26 p.m. with ADON, LN 6's employee file was reviewed. LN 6's employee file indicated, LN 6 did not have a complete competency checklist on hire. ADON stated LN 6 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:28 p.m. with ADON, LN 7's employee file was reviewed. LN 7's employee file indicated, LN 7 did not have a complete competency checklist on hire. ADON stated LN 7 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:30 p.m. with ADON, LN 8's employee file was reviewed. LN 8's employee file indicated, LN 8 did not have a complete competency checklist on hire. ADON stated LN 8 did not have a complete competency checklist form on hire. During a concurrent interview and record review on 6/12/26, at 12:32 p.m. with ADON, LN 9's employee file was reviewed. LN 9's employee file indicated, LN 9 did not have a complete competency checklist on hire. ADON stated LN 9 did not have a complete competency checklist form on hire. During an interview with the Director of Nursing (DON) on 6/12/26 at 12:43 p.m., the DON stated she had worked for the facility for nearly 3 years. The DON stated the facility determined nurses were competent by putting the nurses on orientation with other already competent nurses on the floor when they are hired. The DON stated the floor nurses will complete the competency checklist for the new nurse and then it is sent to her for review prior to the (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 - Some	new nurse working on their own, then the checklist is sent to Human Resources (HR) to be placed in the employee's file. The DON stated all the licensed nurses should have a completed competency checklist in their employee file. The DON further stated, LN 6 was recently hired and she did not remember seeing her competency checklist completed prior to working on her own. The DON stated, I can't say when asked who cleared LN 6 as competent to provide care to residents in the facility as a new employee. A review of the facility's Daily Staffing Schedule dated 6/12/26, indicated, LN 6 was on the schedule to work on her own with a Resident assignment on the medication cart during AM [morning] shift. During an interview on 6/12/26, at 1:02 p.m., with LN 10, LN 10 stated new nurses are usually trained by following three different nurses and then they take an assignment on their own. A review of the facility's Job Description: Director of Nursing indicated, Essential Duties .Responsible for the recruiting, hiring and training of nursing staff. Job description was signed by DON in 2023. A review of the facility's Policy and Procedure (P&P) titled, Orientation Program for Newly Hired Employees, Transfers, Volunteers dated 2019 indicated, An orientation program shall be conducted for all newly hired employees. a written record is maintained of each participant's orientation program. A review of the facility's P&P titled, Staffing, Sufficient and Competent Nursing dated 2026 indicated, The facility provides sufficient nursing staff with the appropriate skills and competencies necessary to provide nursing and related care and services for all residents. 1. Competency is a measurable pattern of knowledge, skills, abilities, behaviors, and other characteristics that an individual needs to perform work roles or occupational functions successfully. 2. All nursing staff must meet the specific competency requirements of their respective licensure and certification requirements defined by state law.		