STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	056063	A. Building B. Wing	06/17/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Infinity Care of East Los Angeles	101 S Fickett Street Los Angeles, CA 90033

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 0689 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to follow its policy requiring notification of the Administrator and the local police department when, on 6/15/2026 at 9 PM, the facility received a report from a neighbor in an apartment building across the street that a suspicious person had been seen on the facility's rooftop. On 6/15/2026 at 11:40 PM, a fire occurred on the facility's rooftop.This deficient practice placed a potential risk to the health, safety, and security of all residents and staff.Findings:During a record review on 6/16/2026 at 3:15 PM of the Preliminary Investigation Report binder, the Registered Nurse Supervisor's (RNS 1) Statement of the Event, dated 6/16/2026 was reviewed. The Statement of the Event indicated RNS 1 received a report from RNS 2 informing RNS 1 that on 6/15/2026 at 9 PM, a neighbor from an apartment building across the street informed RNS 2 that an unknown male was observed by the neighbor exiting the rooftop of the facility via the side stairwell/gate. The statement also indicated that at approximate 11:40 PM, a fire on the rooftop was reported to RNS 1 and 911 (a universal emergency telephone number used in the United [NAME] to quickly contact local police, fire, and medical responders). During a concurrent observation and interview on 6/16/2026 at 3:18 PM with the Maintenance Supervisor (MS), the metal door that serves as a side entry and exit to and from the street was observed unlocked. The MS stated the metal door remains unlocked all day and all night. The MS further stated that a homeless person may have accessed the facility premises through the unlocked metal door and acknowledged the door should always be kept locked. During an interview with the Director of Nursing (DON) on 6/16/2026 at 2:50 PM, the DON stated a fire had broken out on the facility's rooftop on 6/15/2026 at 11:40 PM. The DON stated she had not been made aware of the report from the neighbor regarding a suspicious person seen on the facility's rooftop. During a concurrent observation of the facility's rooftop and interview on 6/16/2026 at 3PM with the Director of Nursing (DON), Director of Staff Development (DSD), and Nurse Consultant, the rooftop was observed to be a cemented surface containing multiple airˆconditioning units and tarps. In the north area of the rooftop, where the fire had occurred, remaining debris (loose fragments or remnants resulting from destruction, breakage, or deterioration of a structure, object, or material) from the burnt shed (which stored activity supplies) was observed. No other area, including the activity room and offices of the medical records and business office, of the rooftop showed fire damage. During a concurrent observation and interview on 6/16/2026 at 3:30 PM, at the side entry of the facility, with the DSD, two (2) cameras were observed mounted on the side of the building, one facing the parking lot on the south side of the building and the other facing the side entrance and street. The DSD stated the facility had no working surveillance cameras. During an interview on 6/17/2026 at 3:39 PM with RNS 2, RNS 2 stated a neighbor from across the street came to the facility and notified RNS 2 that the neighbor had seen an unknown person leaving the facility's roof top and exiting to the street. RNS 2 stated he went outside the facility and saw that the roof top door was closed, however RNS 2 did not go up to check if it was locked. RNS 2 stated he did not check the third floor for unauthorized people. RNS 2 further stated he did not notify the police department, the Administrator, or the DON. RNS 2 stated he was not aware of (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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0689 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	any policies and procedures regarding presence of unauthorized people on the facility premises. During a concurrent interview and record review on 6/17/2026 at 4:40 PM with the DON, the P&P titled, Building Security/Prowlers (someone who is lurking or creeping around a property without permission, which can suggest they might be attempting theft, trespassing, or other unauthorized activity) and Unauthorized Entry/Civil Disturbance, revised 1/21/2026, was reviewed. The P&P indicated:When staff stay alert, report potential security problems, and consistently follow procedure, many security problems can be prevented or diverted.Suspicious persons on the grounds must be reported to the supervisor immediately. An incident report must be completed and sent to the Administrator's Office immediately.If a prowler comes on the property or an unauthorized person or group of persons attempt to enter the building: immediately call the police, do not hesitate.The administrator must be notified as soon as possible. The DON stated the P&P was not followed when RNS 2 failed to call the police, notify the Administrator and/or DON. The DON stated an unauthorized person on the rooftop, it placed residents' safety and security at risk and potentially could have prevented the fire incident that followed after an unauthorized person was observed at the roof top between 8:30 PM to 9 PM on 6/15/2026.The DON stated that having an unauthorized person on the rooftop placed residents' safety and security at risk and that reporting the incident could potentially have prevented the fire that occurred after an unauthorized person was observed on the rooftop between 8:30 PM and 9:00 PM on 6/15/2026.