

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: 056216	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/30/2026
NAME OF PROVIDER OR SUPPLIER Guardian Care and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 410 Eastwood Ave Manteca, CA 95336	
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 0940 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Develop, implement, and/or maintain an effective training program for all new and existing staff members. Based on interview and record review, the facility failed to demonstrate that they developed, maintained and implemented a training program for an existing Social Services Designee/Assistant (SSA, a support professional who works under the direction of a licensed social workers to help individuals and families in need, connecting them with the resources and services they need to improve their lives), as the facility was unable to provide documentation verifying that the SSA had completed the required training. This failure had the potential to result in the SSA lacking the knowledge and skills necessary to safely and effectively provide social services and meet the needs of residents residing in the facility. Findings: During concurrent interview and record review on 6/30/26, at 3:23 PM with the Director of Staff Development (DSD), the Social Services Designee/Assistant's (SSA) employee file was reviewed. Review of the employee file revealed that the SSA was hired on 6/16/26. However, there was no documentation of competency validation, or job-specific training in the employee's file. During an interview the DSD stated that all staff were expected to receive appropriate orientation and training before performing their job duties, and documentation of the training and competency validation should be maintained in the employee's personnel file. The DSD further stated that the SSA should have completed orientation and had documentation of the required training in the employee's file. The DSD verified that, at the time of the review, the facility was unable to provide documentation of the SSA's competency and, or job-specific training. The DSD further added that she would attempt to locate the records by contacting the Administrator (ADMN), who was the direct supervisor of the SSA and responsible for training. During a concurrent interview and record review on 6/30/26, at 3:40 PM with the ADMN, the SSA employee's file was reviewed. The ADMN stated that the facility was currently without a Social Services Director and added that the SSA was the only staff member assigned to the Social Services Department and that the ADMN was providing oversight of the department during the vacancy. The ADMN added that the facility was in the process of interviewing possible candidates for the Social Services Director position. The ADMN verified that there was currently no documentation of facility competency job-specific training for the SSA in the employees' file. The ADMN confirmed the findings and stated that training should be documented and available in the employees' records. The ADMN stated that she was responsible for training the SSA as a direct supervisor and should document the training that he was receiving. The ADMN further stated that no evidence of documentation signified that no job-specific training was provided to the SSA. During an interview on 6/30/26, at 4:10 PM, the SSA stated that he had very limited knowledge of his job duties and responsibilities as a Social Services Designee/ Assistant. The SSA stated that he was willing to learn and viewed each challenge as an opportunity to gain knowledge and experience in social services. The SSA further stated that social services staff served as resident advocates by providing essential services and support to residents residing in the facility. The SSA explained that having a thorough understanding of his duties and responsibilities, along with receiving appropriate job-specific training, would help him perform his responsibilities effectively and achieve the highest level of performance in his role. The SSA further added that failure to receive proper training could negatively affect the quality 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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F 0940 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	social services provided and potentially negatively impact residents' social service needs and overall well-being. During a subsequent interview and record review on 6/30/26, at 5:18 PM with the ADMN, the facility provided document titled Social Service Designee, that was signed by the ADMN and the SSA on 6/16/26 was reviewed. Review indicated, .The primary purpose of your job position is to assist in planning, developing, organizing, implementing, evaluating, and directing our facility's social service program in accordance with current existing federal, state, and local standards, as well as our established policies and procedures, to assure that the medically related emotional and social needs of the resident are met/maintained on an individual basis.As Social Service Designee, you are delegated the administrative authority, responsibility, and accountability necessary for carrying out your assigned duties. The ADMN stated that the SSA received only verbal training, and no documentation of the job-specific training was maintained in the employee's personnel file. The ADMN stated that Social Services staff were playing an essential role in residents' psychosocial well-being. The ADMN confirmed that the SSA had not received the training to perform the duties and responsibilities which was listed as duties and responsibilities assigned to the position. The ADMN added that she did not anticipate the SSA to have knowledge of all aspects of the Social Services Designee/Assistant job duties and responsibilities. The ADMN stated that, moving forward, she would begin providing training on the SSA's job duties one task at a time and would ensure that all training was documented. The ADMN also acknowledged that the facility did not have a formal training plan for the SSA and stated that she would develop and implement one to ensure the employee receives the training necessary to competently perform the assigned duties and responsibilities. Review of an undated facility provided policy and procedure (P&P) titled Staff Development In-Service Training-General Policies indicated, .The primary purpose of our facility's .training program is to provide our employees with an in-depth review of our established operational policies and procedures, their positions, methods and procedures to follow in implementing assigned duties, and to provide up-to-date information that will assist in providing quality care.Review of an undated facility provided documents titled Staff training/education and competencies indicated, .Staff training/education and competencies that are necessary to provide the level and types of support and care needed by its resident population.The Director of Staff Development reviews current regulations and list all staff training and competencies needed by type of staff, including managers, nursing, and other direct care staff.to ensure competencies are reviewed at the time the staff member is hired, and cadence of subsequent reviews.		