

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  056242	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/10/2026
NAME OF PROVIDER OR SUPPLIER  Westlake Convalescent Hospital		STREET ADDRESS, CITY, STATE, ZIP CODE  316 S Westlake Avenue Los Angeles, CA 90057	

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)
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>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.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interview, and record review, the facility failed to maintain a clean, safe environment by failing to maintain the: Toilet, counter top and sink in the all gender bathroom next to the nursing station in good working order, clean and sanitary, by not securing the toilet to prevent it from shifting during use, keeping the sink counter corners free from crumbling grout/caulk, as well as, the sink being free from black mold-like build up under the lip of the counter. Wall in room [ROOM NUMBER] from crumbling behind the baseboard and it falling free from the wall, prevent crumbling wall corners above the baseboards and corners, as well as, free from dust and grime build up. Sink in the bathroom for rooms [ROOM NUMBERS], from pulling away from the wall from cracked caulking and peeling paint, keeping the exposed pipes to the sink clear of rust, as well as the walls above the baseboard on corners and edges intact and free from dirt and grime build up and the baseboard from peeling away from the walls. Corners and edges of the wall and flooring next sliding glass door in room [ROOM NUMBER] free from dust and grime build up, and crumbling foam filler material on either side of the metal transition threshold ramp. These deficient practices exposed the residents to an unkempt, dirty, run down, environment and had the potential to attract pests and affect resident safety. During a concurrent observation and interview on 4/10/26 at 11:54 am with the Maintenance Assistant (MA), the bathroom next to the nurses station in the subacute unit was observed with the toilet loose from the floor with newspaper stuffed between the floor and toilet and it missing the caulk to seal it. MA states it is like that because they recently did some plumbing and replaced a pipe underneath that turned out to be too long and so the toilet is not flush with the floor. States he can fix it and it should be glued/sealed around the base. During further observation in the same bathroom with MA, the sink counter was observed to be pulling away from the back splash piece and to have missing or cracked/crumbling grout or caulking material. The MA validated this and stated he can reglue it. On the same sink there was also a black build up under the lip of where the counter top met the sink bowl. The MA validated this observation and stated that is a housekeeping issue. During a concurrent observation and interview on 4/10/26 at 12:04 PM with the MA, the baseboard near the patio sliding glass door of resident room [ROOM NUMBER] was observed peeling off the wall, then when the MA went to pull back the curtain the baseboard fell off exposing a completely crumbled area of wall. The MA picked up the baseboard and stated he can fix it needs to be reglued on, and further states there are no mice in there currently. During a concurrent observation and interview on 4/10/26 at 12:07 PM with the MA, the bathroom in between room [ROOM NUMBER] and 24 was observed with sink what was pulling away from wall with cracked/crumbling caulking/grout and peeled off paint. The exposed pipes to sink with rust, and the corners of the bathroom with dirt, grime build up and with the right side baseboard peeling away from the wall. The MA acknowledged and validated the observations and stated they should be fixed. During a concurrent observation and interview on 4/10/26 at 12:07 PM with the Maintenance Assistant (MA), the bathroom in between room [ROOM NUMBER] and 24 was observed with sink what was pulling away from wall with cracked/crumbling caulking/grout and peeled off paint. The exposed pipes to sink with (continued on next page)</p>

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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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>rust, and the corners of the bathroom with dirt, grime build up and with the right side baseboard peeling away from the wall. The MA acknowledged and validated the observations and stated they should be fixed. During a concurrent observation and interview on 4/10/26 at 12:11 PM with the MA, in room [ROOM NUMBER]. The baseboard near the sliding glass door is observed peeling away from the wall along with some of the paint and the corners of the sliding glass door are observed with dirt and grime build up. The MA validated the observations and states he can fix the baseboard but the dirt is a housekeeping issue. During a record review of the facility's daily maintenance log dated from 11/16/25 through 3/29/26, the log had no mention any of the above environmental issues, which was verified by the MA. During a record review of facility's policy &amp; procedure (P&amp;P) titled, Quality of Life - Homelike Environment, revised 1/10/25, Residents are provided with a safe, clean, comfortable and homelike environment. The facility staff and management shall maximize , to the extent possible, the characteristics include. cleanliness and order.</p>		

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<p>F 0924</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Put firmly secured handrails on each side of hallways.</p> <p>Based on observation, interview, and record review, the facility failed to maintain a safe environment by failing to secure the upper end of the stairway handrail (on the right side as you go up) to the wall. This deficient practice had the potential to affect staff and residents' safety while using the stairs. During a concurrent observation and interview on 4/10/26 at 11:51 am with the Maintenance Supervisor (MS) and Maintenance Assistant (MA), the handrail for the right hand side of the stairs from the parking lot to the first floor of the facility was observed with the top-end of the handrail loose from the wall, easily movable. The MS and MA both validated the handrail was loose, and the MS stated he just had to screw it in tighter to secure it, then the MA stated they may have to add a piece of wood to fix it but that it would get fixed. During a record review of facility's policy &amp; procedure (P&amp;P) titled, Quality of Life - Homelike Environment, revised 1/10/25, Residents are provided with a safe, clean, comfortable and homelike environment. The facility staff and management shall maximize, to the extent possible, the characteristics include. cleanliness and order.</p>		