

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555093	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/26/2025
NAME OF PROVIDER OR SUPPLIER Citrus Post-Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 1929 N. Fairview Street Santa Ana, CA 92706	

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 0606 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Not hire anyone with a finding of abuse, neglect, exploitation, or theft. (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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<p>F 0606</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview, facility document review, and facility P&P review, the facility failed to thoroughly investigate the results of a background screening of a Medi-Cal excluded employee for one of two facility staff reviewed (RNA 1). * The facility failed to thoroughly investigate the exclusion status of a direct access employee that appeared on the new-hire background screening. This failure had the potential to compromise the safety of the residents in the facility. Findings: Review of the facility's P&P titled Background Screening Investigations revised [DATE] showed the following:- The facility conducts employment background screening checks, reference checks and criminal conviction investigation checks on all applicants for positions with direct access to residents (direct access employees).- For any individual applying for a position as a certified nursing assistant, the state nurse aide registry is contacted to determine if any findings of abuse, neglect, mistreatment of individuals, and/or theft of property have been entered into the applicant's file.- Should the background investigation disclose any misrepresentation on the application form or information indicating that the individual has been convicted of abuse, neglect, mistreatment of individuals, and/or misappropriation of property, the applicant is not employed or contracted. On [DATE] at 1314 hours, a review of the employment file for RNA 1 was conducted. The employment file showed a hire date of [DATE]. The CNA license number for RNA 1 was effective [DATE], and showed a status of ACTIVE, EMPLOYABLE. However, during the new hire background screening process in 2023, a second CNA license for the same name was found under license number, effective [DATE] and had expired on [DATE], with a status of REVOKED, NOT EMPLOYABLE. On [DATE] at 1342 hours, an interview and concurrent employment file review was conducted with the DSD. The DSD stated there was a new hiring process under the new facility management, and the background screening process was no longer managed by the DSD. The DSD verified the background screening of RNA 1 was completed before she began her employment with the facility. However, the DSD verified under the former background screening process, if an employee showed up as excluded during the background screening, she would attempt to clear the employee's name by adding additional information to the screening such as the Social Security Number and the date of birth or residential addresses, to verify if it was the same employee. The DSD verified this process was not followed during the background screening process of RNA 1 in 2023. On [DATE] at 1423 hours, an interview and concurrent employment file review was conducted with the DSD, Administrator, DON, and Recruitment Lead, who joined via telephone. The Administrator verified the new employees needed to pass the background screening before they could begin orientation at the facility. If the employee did not pass the background screening, the offer of employment would be rescinded. The Recruitment Lead verified under the new screening process, if an employee showed up on the excluded list, the employee would not be considered for employment. The Recruitment Lead stated they could not speak about what happened during the original hiring process of RNA 1 in 2023 but for this situation, since RNA 1 was already hired, the facility would conduct a repeat background screening under the new process to determine RNA 1's eligibility for employment. On [DATE] at 1034 hours, a follow up interview was conducted with the Administrator and Recruitment Lead, who joined via telephone. The Recruitment Lead verified a rigorous background screening process was conducted on RNA 1, which revealed RNA 1 was on the Medi-Cal exclusion list. On [DATE] at 1047 hours, an interview was conducted with the Administrator, DON, and RNA 1, who joined via telephone and an interpreter was used. RNA 1 verified in 2009 he worked under a previous CNA license number but used a fraudulent Social Security Number to obtain this CNA license. RNA 1 stated he then obtained a legal Social Security Number and used it when he applied for his current CNA license.</p>		