STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555098	A. Building B. Wing	05/05/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Greenhaven Healthcare Center	455 Florin Road Sacramento, CA 95831

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 0850 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Hire a qualified full-time social worker in a facility with more than 120 beds. Based on interview and record review, the facility failed to ensure the employed social worker met the minimum qualifications of the position as per federal regulations for a census of 143 residents, when the social worker had no bachelor's degree since hiring to meet the required minimum qualifications of the position for a facility with more than 120 beds.This failure decreased the facility's potential to provide social services that meet the residents' individualized needs.Findings:A review of the Social Service Manager's (SSM) undated Employee Information, indicated SSM was hired on 11/10/25 for the Social Services Director (SSD) position.A review of the SSM's Offer Letter for Social Services Leader at [the facility name], dated 10/21/25, indicated SSM was offered a full-time position as a Social Services Lead and anticipated starting on 11/17/25.A review of the facility's undated document for manager key personnel, indicated SSM was in charge of the social services department.A review of the SSM's Application for Employment, dated 10/30/25, indicated the SSM's applied position was SSD and she had an associated of applied science (AAS) degree in medical office administration and medical assisting.During a concurrent interview and record review on 5/5/26 at 11:30 a.m. with SSM, SSM's employee file was reviewed. SSM confirmed she had no bachelor's degree and had an AAS degree from a college. SSM stated her role was to conduct psychosocial assessment and care plan meetings for all residents, coordinate safe and timely discharges, and collaborate care with families and communities. SSM further stated she worked independently and there was no SSD overseeing her social work since she was hired on 11/10/25.During a concurrent interview and record review on 5/5/26 at 11:55 a.m. with the Director of Nursing (DON), SSM's employee file was reviewed. DON confirmed SSM had an AAS degree. DON stated SSM worked independently and no personnel in the facility with a bachelor's in social work nor human services overseed SSM's work. A review of the facility's license, dated 6/30/25 to 6/29/26, indicated the facility's licensed capacity was 148 skilled nursing beds.A review of the facility's job posting titled, Social Services Director, dated 4/7/26, indicated candidates for the SSD job position must have a bachelor's degree in either psychology, sociology, or social work.

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