

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555163	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/10/2026
NAME OF PROVIDER OR SUPPLIER Shoreline Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 5225 South J Street Oxnard, CA 93033	
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 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. Based on interview and record review, the facility failed to adhere to its policy and procedure requiring staff to use English as the primary language of communication, as outlined in the facility's Official language Designation policy. This failure resulted in noncompliance with established administrative standards and oversight practices. These failures have the potential to impede effective communication, compromise residents' rights to receive information in a manner they can understand, and place residents at risk for diminished safety and quality of care. During an interview on 03/25/26 at 2:45 p.m. with the Certified Nursing Assistant (CNA 1) stated, that staff of certain descent were being given preferential treatment at the facility. CNA 1 stated that they had been instructed by their superiors not to speak in their native language in the presence of others and had complied with that directive. CNA 1 further stated that other staff members continued to speak their native language in front of staff and residents without corrective action, and that residents had expressed discomfort about conversations occurring in a language they could not understand. During an interview on March 25, 2026, at 2:49 p.m. with CNA 2 stated, that staff of certain backgrounds were perceived as receiving preferential treatment regarding shift assignments and other work-related matters. CNA 2 further reported that residents had expressed concerns, noting that they felt disrespected when staff communicated in languages the residents did not understand. During an interview on March 25, 2026, at 2:52 p.m. with the Hospitality Aide (HA) stated, that certain staff members of certain descent were perceived as receiving preferential treatment regarding vacation scheduling, call-offs, and shift assignments. HA further stated that some residents had expressed concerns about staff communicating in languages the residents did not understand, noting that this made the residents uncomfortable. During an interview on 03/25/26 at 3:16 p.m. with Resident 4 stated, that staff speaking in other languages does not bother them, noting that many people speak different languages and Resident 4 has become accustomed to this. During an interview on 03/25/26 at 3:23 p.m. with Resident 5 stated, that it is extremely bothersome when staff speak in a language that Resident 5 does not understand. Resident 5 stated feeling as though staff may be speaking negatively about other residents, which causes Resident 5 to feel anxious. Resident 5 reported asking staff repeatedly to speak in English to ensure understanding. Resident 5 further explained that they have resided in the facility for five (5) years and that this concern has continued despite multiple requests for staff to communicate in a language that Resident 5 can understand. During an interview on 03/25/26 at 3:29 p.m. with Resident 6 stated, that it does not bother Resident 6 when staff speak in other languages in front of Resident 6. Resident 6 continued to state that people in California have been speaking in other languages in front of me all my life. During a review of the facility's policy and procedure titled, The Official Language Designation, dated 08/2025, indicated English is the official language of the company to respect and protect the residents' dignity and rights to communicate and to be communicated in their own language; to increase and promote harmony on the units and between employees through the use of a uniform system of communication; to decrease the amount of tension and anxiety among residents and employees which can result when multiple languages are spoken in and around patient care areas; and all employees on duty must speak English.		

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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