STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555404	A. Building B. Wing	05/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Riverside Village Healthcare Center	17040 Arnold Dr. Riverside, CA 92518

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to provide a safe and comfortable home-like environment, for two of three residents (Residents 1 and 3), when:1.Resident 1's bathroom had black staining to the tile grout next to the toilet, gray colored dust build up to the overhead bathroom fan vent, a black residue ring to the interior of the toilet water tank, black staining to the posterior sink near faucet handles, black and yellow residue to the exterior toilet bowl and peeling paint to the wall near the toilet was observed inside Resident 1's bathroom; and2. Water was actively leaking and pooling beneath/surrounding the toilet, and peeling paint to the wall near the toilet was observed inside Resident 3's bathroom.These failures had the potential to affect the comfort and psychosocial well-being of the residents.Findings:1.On April 2, 2026, at 9:39 a.m., an unannounced visit was conducted at the facility to investigate a complaint regarding physical environment. On April 2, 2026, at 9:58 a.m., during a concurrent observation and interview with Resident 1 in Resident 1's bathroom, the following were observed:- black staining to the bathroom tile grout next to the toilet;- gray colored dust build up to the overhead bathroom fan vent;- a black residue ring to the interior of the toilet water tank;- black staining to the posterior sink near faucet handles;- black and yellow residue to the exterior toilet bowl; and- peeling paint on the wall near the toilet.In a concurrent interview with Resident 1, she stated, this is disgusting and unsanitary, I do not feel safe using this bathroom. On April 2, 2026, at 12:24 p.m., during a concurrent observation and interview in Resident 1's bathroom with Certified Nurse Assistant (CNA) 1. CNA 1 stated the toilet looks dirty and old. CNA 1 further stated that housekeeping should have cleaned the sink, toilet and bathroom fan vent for the resident to feel comfortable during her stay at the facility.On April 2, 2026, at 12:49 p.m., during a concurrent observation and interview in Resident 1's bathroom with Maintenance Director (MD). The MD stated the sink basin had blackened areas and was uncertain if it was mold or dirty only. The MD stated the vent fan above the toilet had dust build up. The MD stated the interior of the toilet tank was dirty with brown stains and the exterior tubing needed to be replaced as it was noisy when flushed. The MD stated the bathroom looked dirty and should have been cleaned and toilet should have been replaced.A review of Resident 1's record indicated the resident was admitted to the facility on [DATE], with diagnoses which included generalized anxiety disorder and difficulty in walking. A review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated March 27, 2026, indicated the resident has a BIMS (Brief Interview for Mental Status) score of 15 (cognitively intact). 2.On April 2, 2026, at 1:51 p.m., Resident 3's bathroom was observed to have water pooling under toilet and water dripping from beneath/surrounding toilet. The wall near the toilet was observed to have peeling paint.On April 2, 2026, at 2:05 p.m., during a concurrent observation and interview in Resident 3's bathroom with CNA 2, CNA 2 stated the CNA was expected to report to the charge nurse or housekeeping department if the resident's room required maintenance. CNA 2 stated the water leaking from the toilet should have been reported immediately for resident safety due to risk of falls and injuries. CNA 2 further stated Resident 3's bathroom wall peeling has been like this for a while and should have been reported to maintenance for repair. On April 2, 2026, at 2:22 p.m., during a (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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	concurrent observation and interview in Resident 3's bathroom with the MD, the MD confirmed water was actively leaking and pooling beneath/surrounding the toilet. The MD stated this was a safety concern as this could place the residents at risk to slip and fall. The MD further stated it was not acceptable to have the resident's bathroom in this condition and Resident 3's bathroom should have been repaired. A review of Resident 3's admission Record, indicated the resident was admitted to the facility on [DATE], with diagnoses which included hemiplegia (weakness in one side).A review of Resident 3's History and Physical, dated February 23, 2025, indicated the resident had the capacity to understand and make decisions.A review of Resident 3s Care Plan, dated March 13, 2025, indicated, .At risk for falls/injury .due to .balance problem .safely promote functional ability to highest practicable level .bathing facility with non-slip surface .keep environment free of hazards .A review of the facility's policy and procedure titled, Homelike Environment, revised February 2021, indicated, .Residents are provided with a safe, clean, comfortable . homelike environment .encouraged to use their personal belongings to the extent as possible .The facility staff and management maximizes .to the extent possible .the characteristics of the facility .that reflect a personalized, homelike setting These characteristics include .clean, sanitary and orderly environment .comfortable .A review of the facility's policy and procedure titled, Policies and Practices-Infection Control, revised October 2018, indicated, .The facility's infection control policies .are intended to facilitate .maintaining a safe, sanitary and comfortable environment .to help prevent and manage transmission of diseases and infections .