

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555771	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/24/2024
NAME OF PROVIDER OR SUPPLIER  Brookdale Riverwalk Snf (CA)		STREET ADDRESS, CITY, STATE, ZIP CODE  350 Calloway Drive, Building C Bakersfield, CA 93312	

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 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>50939</p> <p>Based on observation, interview, and record review, the facility failed to:</p> <ol style="list-style-type: none"> <li>1. Ensure the dry food storage room in the kitchen was maintained in a sanitary condition when lifeless roaches were found on the floor and the drain.</li> <li>2. Ensure the clean water pitcher storage cabinets were cleaned and free from pest.</li> </ol> <p>These failures had the potential for contaminating the dry food and clean water pitchers, placing residents at risk for foodborne illnesses.</p> <p>Findings:</p> <p>1. During an observation on 5/24/24 at 10:41 a.m. in the kitchen, the dry food storage room drain had three lifeless roaches approximately 0.5 inches in size and two lifeless roaches approximately 0.5 inches in size, in the corner of the dry storage room.</p> <p>During an interview on 5/24/24 at 10:47 a.m., with Assistant Dining Supervisor (ADS), ADS stated she saw few roaches last week. ADS stated she reported it (roaches) to the maintenance (department).</p> <p>During an interview on 5/24/24 at 10:49 a.m., with Dietary Dining Supervisor (DDS), DDS went to see the lifeless roaches in the drain and in the corner of the dry storage room. DDS stated she saw the dead roaches in the drain and on the corner of the room. DDS stated there is no log for cleaning the dry storage room.</p> <p>During an interview on 5/24/24 at 10:51 a.m., with Administrator, Administrator stated the last pest control check was performed on 5/16/24. Administrator stated there were no roaches found by the pest control but did spray and no staff reported about any roach.</p> <p>During an interview 5/26/24 at 11:53 p.m. with Certified Nurse Assistant (CNA) 1, CNA 1 stated she worked at the night shift. CNA 1 stated on Friday (5/24/24), she saw one live roach on the wall crawling towards the dining room. CNA 1 stated she reported it (roach) to the licensed nurse.</p> <p>(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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of the facility's policy and procedure (P&amp;P) titled, Dry Storage, dated 8/29/23, the P&amp;P indicated, The walls, ceiling and floor should be maintained in good repair and regularly cleaned.</p> <p>2. During a concurrent observation and interview on 5/24/24 at 11 a.m. with DDS in the dining room, there were three cabinets with stored clean water pitchers. The water pitchers were stored in upside down position. There were white residues on the shelves. There was one live roach approximately 0.5 inches at the very bottom of the shelf in the third cabinet. DDS stated, Oh yeah, we will clean it [cabinets] up right now. DDS stated there is no log for cleaning the water pitcher storage areas.</p> <p>During a review of the facility's policy and procedure (P&amp;P) titled, Cabinets and Drawers, dated 8/29/23, the P&amp;P indicated, Use a mild detergent and water. Removable drawers should be removed and washed. Rinse shelves and drawers with clean sponge and dry.</p>		