

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555808	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/11/2025
NAME OF PROVIDER OR SUPPLIER Santa Monica Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1338 20th Street Santa Monica, CA 90404	

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 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public. (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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review the facility maintenance failed to report nonfunctioning thermostats to facility administration for three of three sampled residents (Residents 1,2 and 3). This deficient practice caused the facility maintenance to turn off the air conditioning unit at night as they were unable to regulate the temperatures in the building leaving residents to complain about the heat. On 8/20/2025 and 9/2/2025 The California Department of Public Health (CDPH) received anonymous complaints alleging the facility's air conditioning was not functioning properly; and the facility was turning off the air conditioning which caused the temperature to be warmer at night. A review of Resident 1's admission Record indicated the facility originally admitted this [AGE] year old female on 1/22/2020 and most recently on 7/28/2025 with diagnoses including peripheral neuropathy(permanent nerve damage causing numbness, tingling and weakness), migraines (severe headaches), obesity (severely overweight), cardiovascular disease (disease of the vessels around the heart), cerebral infarct (CI-stroke, loss of blood flow to a part of the brain) with hemiplegia (total paralysis of the arm, leg, and trunk on the same side of the body) on the left side, major depressive disorder (mental condition that causes persistent sadness), anxiety (mental condition that causes constant worry or fear over uncontrollable situations) disorder, hypotension (low blood pressure) and chronic obstructive pulmonary disease (COPD-a chronic lung disease causing difficulty in breathing). A review of Resident 1's Minimum Data Set (MDS-a resident assessment) dated 7/1/2025 indicated Resident 1's cognition (mental ability to make decisions for daily living) was not intact. Resident 1 required maximal assistance (helper does more than half the effort to complete the task) with toileting, showering and transferring (moving in between surfaces). A review of Resident 2's admission Record indicated the facility admitted this [AGE] year-old female on 2/3/2025 with diagnoses including spinal stenosis (narrowing) lumbosacral, fibromyalgia (long term widespread muscle pain), osteoarthritis (OA- (a progressive disorder of the joints, caused by a gradual loss of cartilage) of left knee, Type 2 Diabetes Mellitus (DM-a disorder characterized by difficulty in blood sugar control and poor wound healing), Morbid obesity, cellulitis (a skin infection that causes swelling and redness) of the neck, Anxiety (condition causing persistent worry and fear over uncontrollable situations), depression, insomnia (trouble falling asleep or staying asleep) and gastroesophageal reflux disease (GERD-heartburn). A review of Resident 2's MDS dated [DATE] indicated Resident 2's cognition was intact. Resident 2 required maximal assistance with toileting, bathing, showering and transfers. A review of Resident 3's admission Record indicated the facility admitted this [AGE] year-old male on 12/10/2024 with diagnoses including Hemiplegia and hemiparesis following cerebral infarction affecting the right side, DM, hypertension (HTN-high blood pressure) and Nicotine dependence. A review of Resident 3's MDS dated [DATE] indicated Resident 3's cognition was intact. Resident 3 was dependent (helper does all of the effort to complete the task) on toileting and bathing and required maximal assistance with transferring. During an interview on 8/21/2025 at 10:43 a.m. with the Maintenance Supervisor (MS). The MS has been working at the facility for 6 weeks. The MS stated everyday one of the maintenance assistants (MA) checks the heating, ventilation and air conditioning (HVAC-system used to control the internal environment of a building by regulating temperature, humidity and air quality) system daily to ensure it is functioning. The MS also stated the MA's check the temperatures in every room once a week. During an interview on 8/21/2025 at 10:52 a.m. with the MA. The MA stated, I go to the roof daily and check the HVAC system to ensure its working. We always hear complaints from the residents that they are too cold, so we turn it off; then the residents say they are too hot, so we turn it back on. The MA stated, I check the temperatures in the rooms with a temperature gun when my supervisor asked me to do it once a week. The goal temperature is between 72 degrees Fahrenheit and 76 degrees Fahrenheit. The MA went on to say, Resident 1 complained it was too hot and asked for a fan. I told Resident 1 to complain to the social worker, but I don't know if they got Resident 1 another fan. Resident 1 had a fan there in the room, but it was not working; so Resident 1 asked me to fix the fan. I told Resident 1 the fan was trash. The MS fixed the fan for Resident 1 and put it back in Resident 1's room. A few days later, Resident 1 asked for batteries to put in the fan, so I told the MS, and the MS got Resident 1 another fan. During a concurrent observation and interview on 8/21/2025 at 12:06 p.m. with Resident 1 inside Resident 1's room. A small fan was seen on the bedside table next to Resident 1's bed not currently circulating and another standing electric fan in the corner of the room not currently circulating. Resident 1 stated. It gets hot in here at night. I don't know if they turn the air conditioning off at night or what</p>		