STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555900	A. Building B. Wing	04/09/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Veterans Home of California - Fresno	2811 W Cesar Chavez Blvd Fresno, CA 93706

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 0658 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure services provided by the nursing facility meet professional standards of quality. Based on interview, and record review, the facility failed to ensure one of three sampled residents (Resident 1), physician's orders for wound care was followed. This failure placed Resident 1's wound at a potential risk for infection. Findings: During a concurrent observation and interview on 4/9/2026 at 1:42 p.m. in Resident 1's room, RN [Registered Nurse] donned gown and gloves and did a dressing change on Resident 1's left ear wound, assisted by CAN [Certified Nurse Assistant] 1. RN used two small, pink plastic bottles of normal saline, gauze, Vaseline packet and a non-adherent dressing to dress Resident 1's wound. RN 1 stated, We clean the wound site with saline, pat dry and put petroleum on the gauze and secure it with dry dressing. During a review of Resident 1's Monthly Physician Order dated March 20206, the orders indicated, . 2/22/26 . Cleanse non-healing ulcer to LT [left] ear auricle site with mild soap and water, pat dry, apply Vaseline and cover with dry dressing DAILY and PRN [as needed] for soilage or dislodgement . During a concurrent interview and record review on 4/10/2026 at 3:50 p.m. with the Licensed Vocational Nurse (LVN), Resident 1's Nurses Progress Notes was reviewed. The Notes dated 3/23/26 at 2130 (9:30 p.m.) indicated, . Cleaned up with NS [normal saline], pat dry. Apply ABX [antibiotic] cream, Cover [with] . dressing . LVN stated they did not have an order for the antibiotic cream. LVN stated, On the order it says mild soap and water. LVN stated the physician's order was not followed. During an interview on 4/14/2026 at 3:40 p.m. with Supervising Registered Nurse 1 (SRN1), SRN1 stated Resident 1's wound should have been cleaned using mild soap and water according to the physician's order. During an interview on 4/15/2026 at 9 a.m. with the Director of Nursing (DON), the DON stated physician's orders should be followed. DON stated providing wound care according to the physician's orders prevented infections, complications, and worsening of the wound. During a review of the facility's policy and procedure (P&P) titled, Medication and Treatment Administration dated 10/21/2025 the P&P indicated, . Treatments will be administered as prescribed .

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555900	A. Building B. Wing	04/09/2026

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Veterans Home of California - Fresno	2811 W Cesar Chavez Blvd Fresno, CA 93706

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0684 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate treatment and care according to orders, resident?s preferences and goals. Based on observation, interview, and record review, the facility failed to ensure one of three sampled residents (Resident 1), wound was kept clean and covered. This failure resulted in Resident 1's wound found with maggots.Findings: During a concurrent observation and interview on 4/9/2026 at 1:30 p.m. in Resident 1's room, Resident 1 was lying in bed with head elevated. Certified Nursing Assistant (CNA) 1 donned gown and gloves and positioned Resident 1 on the side. CNA 1 stated Resident 1 had a wound on the left ear. A band aid with gauze was hanging on the back of his left ear. During a review of Resident 1's Medical Oncology Clinic Note, dated 3/6/2025, the Oncology Note indicated, . HPI [History of Present Illness]: . squamous cell carcinoma [abnormal growth of squamous cells] of the left postauricular [behind the ear] skin . past medical history of hypertension [high blood pressure], stroke [occurs when blood flow to the brain is blocked] . During an interview on 4/9/2026 at 2:58 p.m. with CNA 2 stated on 3/23/26 at around 9 p.m., she was doing ADLs (Activities of Daily Living) with Resident 1 when she saw a tiny, white worm (maggot) move by his left neck. CNA 2 stated, 1 worm . I finished doing ADLs and told the nurse . A request for Policy on Wound Care was made on 4/10/2026 at 3:36 p.m. DON stated they do not have a policy. During a concurrent interview and record review on 4/10/2026 at 3:50 p.m. with the Licensed Vocational Nurse (LVN), Resident 1's Clinical Record was reviewed.The Nurses Progress Notes dated 3/23/2026 indicated, Noted maggots on Resident's left back ear wound. LVN stated, I saw some maggots behind the resident's [Resident 1] ear . a lot of tiny maggots Resident 1's Treatment Administration Record (TAR) for the month of March indicated the wound was cleaned and dressed daily. LVN stated wound care was done every day. The Monthly Physician Order for March 20206 indicated, . 2/22/26 Cleanse non-healing ulcer to LT [left] ear auricle site with mild soap and water, pat dry, apply Vaseline and cover with dry dressing DAILY and PRN [as needed]for soilage or dislodgement . LVN 1 stated If the resident's wound was properly cleaned and the dressing applied securely, the fly would not have been able to get to the wound. LVN 1 stated, . there would be no maggots. LVN 1 stated wounds should be properly cleaned and secured with dressing to prevent exposure and infection. During an interview on 4/14/26 at 3:40 p.m. with Supervising Registered Nurse 1 (SRN1), SRN1 stated, There was quite a bit of maggots . it was the size of a half a grain of rice in length and width .the maggots were crawling out of the wound . I would say about 50 maggots . SRN1 stated Resident 1 preferred to lay on the left side which caused the dressing to get dislodged. SRN1 stated there should have been no maggots on the wound if it was kept clean and covered. SRN1 stated wounds needed to be properly cleaned and fully covered to prevent infection and exposure to any particles or flies. During an interview on 4/15/2026 at 9 a.m. with the Director of Nursing (DON), the DON stated there should be no maggots in Resident 1's wound. DON stated if the wound was properly secured with the dressing a fly wound not be able to get to the wound.