

EDGEWATER SKILLED NURSING CENTER

Report ID: CCN 055387
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§ 1 Facility Identity

Facility	EDGEWATER SKILLED NURSING CENTER
CCN	055387
Location	2625 EAST FOURTH STREET, LONG BEACH, CA, 90814
Ownership type	For profit - Corporation
Certified beds	81

§ 2 CMS Federal Record

Civil money penalties on file	\$62,511
Deficiency citations — current cycle	15 (50% vs prior 24 months (30))
Deficiency citations — prior 24 months	30
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$62,511
CA state average	\$26,375 (this facility is 2.4× the CA average)
National average	\$31,239 (this facility is 2.0× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 15 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Complaint
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Complaint
F627	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.	D	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	D	Standard survey
F605	Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.	D	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Standard survey
F698	Provide safe, appropriate dialysis care/services for a resident who requires such services.	D	Standard survey
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	D	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals	D	Standard survey

must be stored in locked compartments, separately locked, compartments for controlled drugs.

F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	D	Standard survey
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	C	Standard survey
F912	Provide rooms that are at least 80 square feet per resident in multiple rooms and 100 square feet for single resident rooms.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: THE ENSIGN GROUP (342 facilities); Owner on file: DALTON, KYLE (individual)
Ownership chain	THE ENSIGN GROUP (342 facilities)
Penalties vs chain average	\$62,511 vs \$20,923 (3.0× the chain average)
Current deficiencies vs chain average	15 vs 10.1 (1.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	3 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 4.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/055387
Snapshot SHA-256	fc13d7a430896ab5b081cb737210a88d86f4a8321e94d7b7771a6db21540fd20
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
 2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 055387.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash fc13d7a43089.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at <https://www.caregiverhelpnow.com/methodology>; the Snapshot SHA-256 above pins this record to that methodology version.

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