

Santa Maria Post Acute

Report ID: CCN 055563
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§ 1 Facility Identity

Facility	Santa Maria Post Acute
CCN	055563
Location	820 West Cook Street, Santa Maria, CA, 93458
Ownership type	For profit - Limited Liability company
Certified beds	55

§ 2 CMS Federal Record

Civil money penalties on file	\$0
Deficiency citations — current cycle	17 (183% vs prior 24 months (6))
Deficiency citations — prior 24 months	6
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	\$0
CA state average	\$26,375 (this facility is 0.0× the CA average)
National average	\$31,239 (this facility is 0.0× 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 17 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
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	E	Standard survey
F610	Respond appropriately to all alleged violations.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	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
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	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey

F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	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 must be stored in locked compartments, separately locked, compartments for controlled drugs.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F921	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.	D	Standard survey

§ 5 Ownership

Ownership record	Owner on file: MAYER, HELENE (individual)
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§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	3 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	4 / 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/055563
Snapshot SHA-256	b039f9c457069cb176f090ea3175e2dd69f7eb053a0c196efa6b72b90f25f8f6
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 055563.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b039f9c45706.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

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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