

# BAY VISTA HEALTHCARE & WELLNESS CENTRE, LP

Report ID: CCN 056042  
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## § 1 Facility Identity

|                |                                            |
|----------------|--------------------------------------------|
| Facility       | BAY VISTA HEALTHCARE & WELLNESS CENTRE, LP |
| CCN            | 056042                                     |
| Location       | 5901 DOWNEY AVE, LONG BEACH, CA, 90805     |
| Ownership type | For profit - Limited Liability company     |
| Certified beds | 70                                         |

## § 2 CMS Federal Record

|                                            |                                   |
|--------------------------------------------|-----------------------------------|
| Civil money penalties on file              | \$33,030                          |
| Deficiency citations — current cycle       | 17 ( 240% vs prior 24 months (5)) |
| Deficiency citations — prior 24 months     | 5                                 |
| 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 | \$33,030                                              |
| CA state average                  | \$26,375 (this facility is 1.3× the CA average)       |
| National average                  | \$31,239 (this facility is 1.1× 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          |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|
| F727  | Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.                                                          | F          | Standard survey |
| F644  | Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.                                                               | E          | Standard survey |
| F812  | Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.                                   | E          | Standard survey |
| F867  | Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.                                                          | E          | Standard survey |
| F585  | Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.      | D          | Complaint       |
| F684  | Provide appropriate treatment and care according to orders, resident's preferences and goals.                                                                                            | D          | Complaint       |
| F842  | Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.                                | D          | Complaint       |
| 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 |
| F645  | PASARR screening for Mental disorders or Intellectual Disabilities                                                                                                                       | D          | Standard survey |
| F677  | Provide care and assistance to perform activities of daily living for any resident who is unable.                                                                                        | D          | Standard survey |

|      |                                                                                                                                                                                |   |                 |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------------|
| 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 | Standard survey |
| F695 | Provide safe and appropriate respiratory care for a resident when needed.                                                                                                      | D | Standard survey |
| F740 | Ensure each resident must receive and the facility must provide necessary behavioral health care and services.                                                                 | D | Standard survey |
| F759 | Ensure medication error rates are not 5 percent or greater.                                                                                                                    | D | Standard survey |
| F760 | Ensure that residents are free from significant medication errors.                                                                                                             | D | Standard survey |
| F880 | Provide and implement an infection prevention and control program.                                                                                                             | D | Standard survey |

## § 5 Ownership & Chain Context

|                                       |                                                                                                                     |
|---------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| Ownership record                      | Chain: CORPORATE INTERFACE SERVICES (41 facilities); Owner on file: CORPORATE INTERFACE SERVICES LLC (organization) |
| Ownership chain                       | CORPORATE INTERFACE SERVICES (41 facilities)                                                                        |
| Penalties vs chain average            | \$33,030 vs \$37,034 (0.9× the chain average)                                                                       |
| Current deficiencies vs chain average | 17 vs 18.2 (0.9× the chain average)                                                                                 |

## § 6 CMS Care Compare Star Ratings

|                       |                                    |
|-----------------------|------------------------------------|
| Overall               | 1 / 5 (state avg 3.2 · US avg 3)   |
| Health inspection     | 2 / 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

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|                          |                                                                                                                                                   |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| CMS data as of           | Jun 2026                                                                                                                                          |
| Independent verification | <a href="https://www.medicare.gov/care-compare/details/nursing-home/056042">https://www.medicare.gov/care-compare/details/nursing-home/056042</a> |
| Snapshot SHA-256         | 00f54695e8fe6236cc94173265619ca799b9f4e3e6895df90f66d28979fdc29a                                                                                  |
| Methodology & version    | v1.0 — <a href="https://www.caregiverhelpnow.com/methodology">https://www.caregiverhelpnow.com/methodology</a>                                    |

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## § 8 For Your Attorney

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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 056042.
  3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 00f54695e8fe.
  4. Deficiency F-tags cited above are searchable in CMS QCOR ([qcor.cms.gov](https://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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