

KERN VALLEY HEALTHCARE DISTRICT DP SNF

Report ID: CCN 555517
Generated: 2026-07-23T17:57:05.866Z

§ 1 Facility Identity

Facility	KERN VALLEY HEALTHCARE DISTRICT DP SNF
CCN	555517
Location	6412 LAUREL AVE, LAKE ISABELLA, CA, 93240
Ownership type	Government - Hospital district
Certified beds	74

§ 2 CMS Federal Record

Civil money penalties on file	\$31,581
Deficiency citations — current cycle	17 (113% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$31,581
CA state average	\$26,375 (this facility is 1.2× the CA average)
National average	\$31,239 (this facility is 1.0× 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
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	G	Complaint
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
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F712	Ensure that the resident and his/her doctor meet face-to-face at all required visits.	E	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	E	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	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
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint

F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey
F813	Have a policy regarding use and storage of foods brought to residents by family and other visitors.	D	Standard survey
F926	Have policies on smoking.	D	Standard survey

§ 5 Ownership

Ownership record Owner on file: BLYTHE, JOHN (individual)

§ 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	1 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	5 / 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/555517
Snapshot SHA-256	b95064fc90b3d7fb78aaf47b66f532df6019303df6ec69ba1f1e7b37db094995
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 555517.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b95064fc90b3.
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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