

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055036	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/10/2024
NAME OF PROVIDER OR SUPPLIER Maple Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2625 Maple Ave. Los Angeles, CA 90011	
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)		
<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45524</p> <p>Based on observation and interview, the facility failed to provide a clean, free of odor, safe and home like environment by failing to ensure that:</p> <ol style="list-style-type: none"> 1. One of seven sampled residents (Resident 2) had a home like environment free of offensive odors. 2. The kitchen staff had a safe and sanitary environment to work in. <p>This deficient practice resulted in Resident 2 having feelings of disgust and feeling unheard as well as lead to a disruption in disruption of their duties.</p> <p>Findings:</p> <ol style="list-style-type: none"> 1. A review of the Admission Record (FS) for Resident 2 indicated that Resident 2 was admitted on [DATE] with diagnoses including major depressive disorder (a mental health condition that causes a persistently low or depressed mood and a loss of interest in activities that once brought joy), anxiety disorder (a mental health disorder characterized by feelings of worry, anxiety or fear that are strong enough to interfere with one's daily activities), and essential (primary) hypertension (hypertension occurs when you have abnormally high blood pressure that's not the result of a medical condition). <p>A review of Resident 1's Minimum Data Set (MDS- a standardized assessment and care screening tool), dated 7/17/2024, indicated Resident 2 was cognitively intact (mental ability to make decisions of daily living) and was independent for all Activities of Daily Living (ADLs-eating, oral hygiene, toileting hygiene, shower/bathe self, upper & lower dressing, putting on/taking off footwear, and personal hygiene).</p> <p>During an interview with the Housekeeper 1 (HK 1) on 9/7/24 at 10:15 am, HK 1 confirmed that the shower was clogged. HK 1 confirmed and stated that the shower frequently broke down but that that was the longest time it went without getting unclogged.</p> <p>(continued on next page)</p>		

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
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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a concurrent observation and interview with Resident 2 on 9/7/24 10:30 am., Resident 2's room was noted to have a strong musty odor that was emanating from the shower room across the hallway and adjacent to Resident 2's room. Resident 2 stated that the strong musty odor was so bad that it made Resident 2 feel so disgusted and sometimes nauseas especially during meals. Resident 2 stated that she had reported to the staff several times, and nothing was done about it. Resident 2 stated that she felt like she was not being heard and finally just gave up reporting about the odor coming from the shower room.</p> <p>During an interview with the Maintenance Supervisor (MS) on 9/7/24 at 11:48 am, the MS confirmed that the shower drain was clogged. The MS stated that it had been clogged since Thursday and was unclogged yesterday Friday but then got clogged back again because the tool they had used was not long enough. He stated that he had reached out to a Plumber 1 (PLM 1) who was scheduled to fix it today. He confirmed the shower was the only one used by all 50 residents in the facility.</p> <p>During an interview with PLM 1 on 9/7/23 at 1:29 pm, PLM 1 confirmed that there was standing water on the shower floor from the drain being clogged causing the offensive odor.</p> <p>2. During a concurrent observation and interview with Dietary Aide 1 (DA 1) on 9/7/24 at 9:44 am, the dry wall on the ceiling next to the back door was observed to have been removed. The area exposed a dark ceiling with metal pipes which included one that was dripping water that fell into a water bucket. The approximately 15-quart (unit of measurement) bucket was about halfway filled with yellowish water and some brownish residue at the bottom. The floor around the bucket some dried water marks. DA 1 did not know exactly when the water started leaking but that the staff were responsible to mop the floor whenever the water overflow. He admitted that the regular duties were to be placed on duty while attending to the water on the floor.</p> <p>During an interview with the Dietary Supervisor (DS) on 9/7/24 at 10:45 am, the DS admitted that there was a leaking pipe in the kitchen. The DS stated that she had noticed the leak on Wednesday when the DS had noticed water on the floor. The DS confirmed and stated that the kitchen staff had been mopping water to keep the floor dry to prevent accidents and prevent unsanitary environment.</p> <p>During an interview with the MS on 9/7/24 at 11:48 am, the MS stated that MS was first made aware about the leak in the kitchen on Wednesday 9/4/2024 early in the morning via a text. The MS stated that between 4:30-to-5 pm, the MS called the plumber to come out but was told that they would not come out until he figured out there the leak was coming from. The MS stated that on Thursday night, MS removed the dry wall from the roof and finally found the leak and the plumber came out on Friday to assess the water leak. The MS stated that it (repair) was a big project which would require about 3 nights because they could not work during the day when the kitchen had to be used.</p> <p>During an interview with the MS on 9/7/24 at 1:45 pm, the MS stated that the plumbers had stated that the piping was going to be replaced because the current pipes were made of old material which rots quickly, so the whole 10 feet (ft) would have to be replaced. The MS stated that the project (repair) would be started on Monday 9/9/2024. The MS confirmed and stated that having water dripping down on the floor was unsanitary.</p> <p>(continued on next page)</p>		

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview with the Director of Nursing (DON) on 9/7/24 at 11:48 am, the DON stated that having a homelike environment included having included having neutral scents. The DON confirmed and stated that having an uncovered sealing and a leaking pipe would invite bugs that dwelled in the walls but did not answer when asked if that was an unsanitary environment.</p> <p>During a review of a Policy and Procedures (P&P) titled Homelike Environment, reviewed 2/2021, indicated, Residents are provided with a safe, clean, comfortable, and homelike environment and encouraged to use their personal belongings to the extent possible. The facility to the extent possible would reflect a personalized homelike setting and include characteristics such as: pleasant, neutral scents.</p> <p>During a review of a P&P titled Policies and Practices - Infection Control, reviewed 10/2018 indicated, This facility's infection control policies and practices are intended to facilitate maintaining a safe, sanitary and comfortable environment and to help prevent and manage transmission of diseases and infections. The same P&P listed under the objectives of their practices included:</p> <ul style="list-style-type: none"> - Maintain a safe, sanitary, and comfortable environment for personnel, residents, visitors, and the general public. 		