

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055077	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/29/2025
NAME OF PROVIDER OR SUPPLIER  Coral Cove Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE  1730 Grand Ave Long Beach, CA 90804	

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 0550</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 dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45425</b></p> <p>Based on interview and record review, the facility failed to ensure one of four sampled residents (Resident 1) was treated with dignity and respect when Resident 1 was not provided incontinence care due to insufficient staffing when Certified Nursing Assistant (CNA 1) was assigned to care for 82 residents.</p> <p>This failure resulted in Resident 1 calling the police (911) when she was not changed on 12/24/2025 from the 11 p.m. to 7 a.m. shift. This failure also had the potential for the other 81 residents in the facility to not receive care and/or a delay of care due to CNA 1 ' s inability to care for 82 residents by herself.</p> <p>Findings:</p> <p>During a review of Resident 1 ' s Admission Record (Face Sheet), the Face Sheet indicated Resident 1 was admitted to the facility on [DATE] with the diagnoses including respiratory failure (the respiratory system cannot adequately provide oxygen to the body).</p> <p>During a review of Resident 1 ' s Minimum Data Set (MDS - a federally mandated resident assessment tool) dated 10/22/2024, the MDS indicated Resident 1 ' s cognition was intact and was dependent (helper does all the effort and resident does none of the effort to complete the activity) from staff to complete activities of daily living (ADLs - routine tasks/activities such as bathing, dressing and toileting a person performs daily).</p> <p>During a review of Resident 1 ' s untitled Care Plan dated 10/16/2024, the Care Plan indicated Resident 1 had an ADL self-care performance deficit related his disease process. The Care Plan ' s interventions included Resident 1 required total dependence by (1-2) staff for toileting.</p> <p>During a review of the facility ' s Monthly Staff Schedule dated 12/2024, the monthly staff schedule indicated on 12/24/2024 there were four Certified Nursing Assistants (CNAs) scheduled to work on the night shift (11 p. m. to 7 a.m. shift).</p> <p>During a review of the facility ' s Nursing Sign-In and Assignment Sheet dated 12/24/2024, the nursing sign in and assignment sheet indicated four CNAs were working on the night shift.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a review of the facility ' s Timecard dated 12/24/2025, the timecard indicated two CNAs clocked in at 11p.m.</p> <p>During a review of the facility ' s Timecard dated 12/25/2025, the timecard indicated two CNAs clocked out at 7 a.m. for the night shift.</p> <p>During a review of the facility ' s CNA Assignment Sheet dated 12/24/2024, the CNA assignment sheet indicated one CNA was assigned two residents, and the second CNA was assigned the remaining 82 residents. The facility had a total 84 residents in house on 12/24/2024.</p> <p>During a review of Resident 1 ' s Nursing Progress Notes dated 12/25/2024 and timed 5:30 a.m., the nursing progress notes indicated Resident 1 called the police and reported she had not been changed all night. The nursing progress note indicated one CNA was working during the night shift.</p> <p>During an interview on 1/29/2025 at 6:50 a.m., CNA 1 stated on 12/24/2024, she was the only CNA assigned to 82 residents while the other CNA was assigned to be a sitter (caregiver who provides constant observation and companionship to patients who require close monitoring due to potential risks like falls, self-harm, confusion, or agitation) for the other two residents. CNA 1 stated Resident 1 was upset because she was not able to change her during the night shift, and Resident 1 called the police.</p> <p>During an interview on 1/29/2025 at 12:38 p.m. with the Payroll Manager (PM), the PM stated according to the timecards for 12/24/2024, there were only two CNAs who worked on the night shift (11 p.m. to 7 a.m. shift). The PM stated the other two CNAs scheduled to work the night shift on 12/24/2024 did not work.</p> <p>During an interview on 1/29/2025 at 2:03 p.m. with the Infection Prevention Nurse (IP), the IP stated with a census of 88 residents, the night shift should be staffed with four to five CNAs. The IP stated it ' s the licensed nurses ' responsibility to make the shift assignments if staffing needs change. The IP stated if the staff is short, the facility will call other CNAs to come extra or to work double shifts.</p> <p>During an interview on 1/29/2025 at 3:12 p.m. with the Administrator (ADM) and Assistant Director of Nursing (ADON), the ADON stated the night shift CNAs should be staff to have seven to nine CNAs so each CNA would be assigned 13 residents each. The ADM stated if there are not enough CNAs assigned to work the night shift, it would be difficult to attend to every resident ' s needs and some would have to wait or not have their needs met.</p> <p>During a review of the facility ' s policy and procedure (P&amp;P) titled Resident Rights, dated 1/2012, the P&amp;P indicated facility ' s employees are to treat all residents with kindness, respect, and dignity. The P&amp;P indicated each resident is allowed to choose activities, schedules and health care that are consistent with their interests, assessments, and plans of care including sleeping, eating, exercise and bathing schedules.</p>		

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<p>F 0732</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>45425</p> <p>Based on observation, interview, and record review, the facility failed to ensure staffing information including actual number of staff and staff working was posted and placed and readily available to residents and visitors.</p> <p>This failure resulted in residents and visitors not being able to access accurate daily numbers of clinical staff taking care of residents.</p> <p>Findings:</p> <p>During an on observation on 1/29/2025 at 11:20 a.m., at the facility entrance, there was no visible daily staffing information including total number staff and actual hours worked on the receptionist desk.</p> <p>During an interview on 1/29/2025 at 11:26 a.m., with the Assistant Director of Nursing (ADON), the ADON stated the hours posted at the receptionist desk was the projected hours and did not include the actual number of staff hours or how many staff were working.</p> <p>During an interview on 1/29/2025 at 11:30 a.m. with the Director of Staff Development (DSD), the DSD stated the hours posted at the receptionist desk was the projected hours and did not include the actual number of staff hours. The DSD stated the significance of posting the staffing hours was to indicate current staffing and compliance with the staffing hours.</p> <p>During an interview on 1/29/2025 at 3:12 p.m. with the ADON and the Administrator (ADM), the ADON stated the purpose of posting the staffing hours was to ensure the facility was meeting the staffing requirements and the facility is staffed at or above the required number. The ADM and the ADON stated staffing hours posted should include the total number of staff including licensed and unlicensed working and the actual hours worked for each shift daily.</p> <p>During a review of the facility ' s policy and procedure (P&amp;P) titled Nursing Department - Staffing, Scheduling and Postings, dated 7/2018, the P&amp;P indicated the facility will post the following information on a daily basis facility name, the current date, the total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift.</p>