

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055111	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  10/16/2024
NAME OF PROVIDER OR SUPPLIER  Fountain View Subacute and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE  5310 Fountain Ave Los Angeles, CA 90029	

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 0732</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Post nurse staffing information every day.</p> <p>43454</p> <p>Based on observation, interview and record review, the facility failed to ensure the actual hours worked by licensed and unlicensed nursing staffing directly responsible for resident care per shift were posted for two of two sampled days (10/15/2024 and 10/16/2024).</p> <p>This deficient practice resulted in the actual staffing information not being readily accessible and available to residents and visitors and had the potential to cause inadequate staffing.</p> <p>Findings:</p> <p>During an observation of the facility on 10/16/2024 at 9:55 a.m., observed Direct Care Services Hours Per Patient Day (DHPPD) posted on the wall with the projection hours information. No actual hours were posted in the DHPPD posting.</p> <p>During a follow-up observation of the facility on 10/16/2024 at 3:27 p.m., observed DHPPD posted on the wall with the projection hours information. No actual hours were posted in the DHPPD posting.</p> <p>During an interview with Director of Nursing (DON), on 10/16/2024 at 3:35 p.m., DON stated, the projection hours are posted for the current day and the actual hours should be posted for the previous day.</p> <p>During an interview with the Administration (ADM) on 10/16/2024 at 3:47 p.m., ADM stated and confirmed, the actual hours was not posted for the previous day (10/15/2024) but it should be posted along with the projection hours of the current day (10/16/2024).</p> <p>During a review of the facility ' s policy and procedure (P&amp;P) titled Posting Direct Care Daily Staffing Numbers reviewed on 3/21/2024, the P&amp;P indicated, Our facility will post on a daily basis for each shift nurse staffing data, including the number of nursing personnel responsible for providing direct care to residents . Shift staffing information is recorded on a form for each shift. The information recorded on the form shall include the following: . the actual time worked during that shift for each category and type of nursing staff.</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 0836</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure the facility is licensed under applicable State and local law and operates and provides services in compliance with all applicable Federal, State, and local laws, regulations, and codes, and with accepted professional standards.</p> <p>43454</p> <p>Based on interview and record review, the facility failed to ensure they are compliance with professional standards of care by failing to ensure its policy and procedure are implemented and followed according to their agreement regarding staff ' s meal-break policy.</p> <p>This finding infringed upon the employee's agreement and acknowledgment.</p> <p>Findings:</p> <p>During an interview with Licensed Vocational Nurse 1 (LVN 1) on 10/16/2024 at 10:03 a.m., LVN 1 stated, they are schedule to work 12 hours per shift as a full-time employee. LVN 1 stated, their hours are being flexed when the census is low in the sub-acute area. LVN 1 stated, they either have them take an hour lunch break with no pay or they go home early.</p> <p>During an interview with Licensed Vocational Nurse 2 (LVN 2) on 10/16/2024 at 11:23 a.m., LVN 2 stated she works full time, 12-hour shift per day and when the census in the subacute is less than 21, they are asked to go home early or have them take an hour of lunch break with no pay and they would end up working less than 12 hour shift a day. LVN 2 stated, this caused them to have a lesser pay on their paycheck.</p> <p>During an interview with Licensed Vocational Nurse 3 (LVN 3) on 10/16/2024 at 1:06 p.m., LVN 3 stated she works full time in the facility, but they ' ve been cutting their hours and are forced to take an unpaid one-hour lunch break when the census is low.</p> <p>A review of the facility ' s Employee Acknowledgement, dated by staff upon hired, indicated that, I (employee) may waive the second 30-minute meal break as long as I (employee) have taken my first meal break and I do not work more than 12 hours that day . By signing, I (employee) further agree that if I work over 10 hours in a shift (but less than 12), I agree to waive the second meal break as long as I have taken my first meal break and I do not work more than 12 hours that shift.</p> <p>During a concurrent interview and record review of the employee ' s meal waiver agreement with Assistant Director of Nursing (ADON) on 10/16/2024 at 2:22 p.m., ADON stated, licensed nurses ' hours are flexed to work less than 12-hour per shift on some days when the census is low. ADON stated, sometimes, the licensed nurses are asked to take one-hour unpaid lunch break so they can flex their hours. ADON stated and confirmed, the meal waiver was signed for all employees, and they are not following the agreement that the employees signed when they were hired.</p> <p>During an interview with Director of Nursing (DON) on 10/16/2024 at 3:35 p.m., DON stated, licensed nurses hours are flexed according to the census. DON stated, they were either have to go home early or take one-hour unpaid lunches to not complete their 12-hour shift.</p> <p>(continued on next page)</p>		

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<p>F 0836</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of the facility ' s policy and procedure (P&amp;P) titled California Meal and Rest Periods revised on 10/14/2019, the P&amp;P indicated, An employee who works over 10 hours in a day (but less than 12 hours) must start his/her second 30-minute meal break no later than the end of the 10th hour of actual work on their shift, unless the employee decides to waiver the second meal break.</p>