

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055119	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/08/2024
NAME OF PROVIDER OR SUPPLIER West Pico Terrace Healthcare & Wellness Centre LP		STREET ADDRESS, CITY, STATE, ZIP CODE 6070 W. Pico Boulevard Los Angeles, CA 90035	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45524</p> <p>Based on interviews and record review, the facility failed to provide pharmaceutical services, including the provision of routine antibiotics as ordered for one of the three sampled residents (Resident 1) as per physician ' s order dated 10/11/2024 at 9:48 pm for Ciprofloxacin HCl (hydrochloride) Otic (relating to or located in the region of the ear) Solution (Ciprofloxacin HCl - is a fluoroquinolone antibiotic that kills bacteria by blocking a protein they need to reproduce and repair themselves) due to suspected ear infection. for had swelling and discharge to the right ear on 10/11/2024.</p> <p>This failure resulted in Resident 1 not receiving the ordered antibiotic for 2 days resulting in redness, swelling, severe pain (right side of face), and a cream-colored wiggling foreign body in the right ear which required the resident be transfer to General Acute Care Hospital (GACH) on 10/20/2024.</p> <p>Findings:</p> <p>During a review of the admission record indicated Resident 1 was initially admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses cerebral (brain) palsy (weakness) [a group of neurological disorders that affect a person's ability to move, balance, and maintain posture], severe intellectual disabilities (a developmental delay that limits a person's ability to communicate and care for themselves), and aphasia (a disorder that makes it difficult to speak).</p> <p>During a review of the Minimum Data Set (MDS - a federally mandated resident assessment tool) dated 8/2/2024, indicated Resident 1 severe cognitive impairments (Problems with a person's ability to think, learn, remember, use judgement, and make decisions). The MDS indicated Resident 1 was dependent for all Activities of Daily Living (ADLs - ADLs- routine tasks/activities such as bathing, dressing and toileting a person performs daily to care for themselves).</p> <p>During a review of a change in condition dated 10/11/2024 at 9:39 pm indicated, Resident 1 was noted with swelling on ear with discharge.</p> <p>During a review of a physician ' s order dated 10/11/2024 at 9:48 pm indicated an order for Ciprofloxacin HCl Otic Solution due to suspected ear infection. The order indicated ok to administer when medication is available.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a review of a physician ' s order dated 10/11/2024 at 10:16 pm, the order indicated to collect a culture (collecting a sample of fluid from Resident 1 ' s ear discharge) from the right ear on 10/14/2024.</p> <p>During a review of a nursing progress note dated 10/14/2024 at 7:32 am indicated, Reported by charge nurse on 10/13/24 to MD that pharmacy informed facility Ciprofloxacin Otic solution currently not in stock. Charge nurse asked MD (Medical Doctor) if there is alternative recommended, response given 10/14/24@ 732 AM to try Ofloxacin Otic solution.</p> <p>During a review of a physician ' s order dated 10/14/2024 at 9:13 am indicated, Ofloxacin Otic Solution 0.3 % (Ofloxacin (Otic - used to treat infections of the ear canal) Instill 2 drop in right ear two times a day for Right ear infection for 7 Days Ok to administer when on hand.</p> <p>During a review of a nurse progress noted dated 10/18/2024 at 12:25 pm indicated, Culture from Right ear resulted today, results showing heavy growth of Gram-negative bacilli (a type of bacteria classified by the color they turn after a chemical process called Gram staining is used on them. they are among the world's most significant public health problems due to their high resistance to antibiotics). MD made aware of results. MD acknowledged to continue with current ATB therapy. Resident is currently afebrile. No noted discharge from right ear today. Plan of care ongoing.</p> <p>During a review of the change in condition dated 10/20/2024 indicated, Resident 1 noted with right ear has nut discharged , swelling and with foreign object. Vital signs are WNL (withing normal limits), no fever. MD was notified and order to send it to the hospital for further evaluation. he needs an ENT (Ear, Nose, and Throat- Specialized MD) evaluation. pick up time by the ambulance/APA will be 2230 to 2400.</p> <p>During a review of a physician ' s order dated 10/20/2024 at 9:40 pm, indicated to transfer to GACH for further evaluation on right ear infection.</p> <p>During an interview with Licensed Vocational Nurse 1 on 11/6/2024 at 5:20 pm, LVN 1 stated that doing rounds during his shift LVN 1 noted Resident 1 ' s right side of his face as well as right ear had swelling and redness. LVN 1 stated tried to touch his right arm to assess further, Resident 1 flinched and guarded the right side of his face as though he had severe pain. LVN 1 stated that that he noted upon inspection of the right ear while using an otoscope (a medical instrument that allows a clinician to examine the ear canal and eardrum by shining a light and magnifying the area) a cream-colored foreign body wiggling and moving. LVN1 stated that he informed the MD and was given orders to send Resident 1 to the GACH for further evaluation.</p> <p>During an interview with Resident ' s 1 Representative (RP) on 11/7/2024 at 8:58 am, RP stated that when she had contacted the GACH to check on Resident 1 ' s condition, RP was told that Resident 1 had maggots (a small, wormlike fly larva) in the right ear. RP stated the GACH stated that was not the first time that Resident 1 was sent to GACH with maggots in his ears.</p> <p>(continued on next page)</p>		

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<p>F 0755</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 on 11/8/2024 at 10:24 am, the DON confirmed that Resident had ear infections on 5/10/2024, 8/15/2024, and 10/11/2024. The DON stated that the ENT had seen Resident 1 in May after the first ear infection but was not contacted for the other two ear infections. The DON admitted that the ENT should have been informed for a better plan on preventing further ear infections. The DON admitted there was 2-day delay between the order of the ciprofloxacin ear drops and the alternative Ofloxacin ear drop that was ordered after the pharmacy had informed the facility staff that the ciprofloxacin ear drops were not available. The DON stated that it was important to follow up with pharmacy right away to confirm orders had been filled then notify MD right away if not available. The DON acknowledged that the nursing staff should have assessed and identified the increase in redness, swelling, and pain before it got worse on 10/20/2024.</p> <p>A review of a P&P titled UNAVAILABLE MEDICATIONS, updated 8/2019 indicated, Medications used by residents in the nursing facility may be unavailable for dispensing from the pharmacy on occasion. This situation may be due to the pharmacy being temporarily out of stock of a particular product, a drug recall, manufacturer's shortage of an ingredient, or the situation may be permanent because the drug is no longer being made. The facility must make every effort to ensure that medications are available to meet the needs of each resident.</p> <p>A review of a P&P titled Change of Condition Notification, revised 3/17/2022, indicated, To ensure residents, family, legal representatives, and physicians are informed of changes in the resident's condition in a timely manner. The same P&P indicated A need to alter treatment significantly (e.g. based on lab/x-ray results, a need to discontinue an existing form of treatment due to change of condition).</p>		