

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055286	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/08/2025
NAME OF PROVIDER OR SUPPLIER Kearny Mesa Convalescent and Nursing Home		STREET ADDRESS, CITY, STATE, ZIP CODE 7675 Family Circle Drive San Diego, CA 92111	
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 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.</p> <p>39438</p> <p>Based on interview, record review, and facility policy review, the facility failed to ensure the comprehensive care plan was revised to accurately reflect the information in the comprehensive assessment, which affected 1 (Resident #61) of 4 residents reviewed for advance directives. Specifically, the facility failed to revise Resident #61's care plan to reflect the resident's code status listed in the comprehensive assessment.</p> <p>Findings included:</p> <p>A facility policy titled, Care Plans, Comprehensive Person-Centered, revised 03/2022, revealed, A comprehensive, person-centered care plan that includes measurable objectives and timetables to meet the resident's physical, psychosocial and functional needs is developed and implemented for each resident. The policy revealed, 2. The comprehensive, person-centered care plan is developed within seven (7) days of the completion of the required MDS [Minimum Data Set] assessment (Admission, Annual or Significant Change in Status), and no more than 21 days after admission). The policy indicated, 11. Assessments of residents are ongoing and care plans are revised as information about the residents and the residents' conditions change.</p> <p>Resident #61's Admission Record indicated the facility admitted the resident on 03/29/2025. According to the Admission Record, the resident had a medical history that included a primary diagnosis of acute pyelonephritis (kidney infection).</p> <p>Resident #61's Physician Orders for Live-Sustaining Treatment (POLST), dated 04/01/2025 and signed by the resident, indicated that if the resident had no pulse and was not breathing, the resident's choice was Do Not Attempt Resuscitation/DNR (Allow Natural Death).</p> <p>An admission MDS, with an Assessment Reference Date (ARD) of 04/04/2025, revealed Resident #61 had a Brief Interview for Mental Status (BIMS) score of 14, which indicated the resident had intact cognition. Per the MDS, the resident's POLST form identified that if the resident had no pulse and was not breathing, the resident's choice was not to be resuscitated. The MDS was signed as completed on 04/07/2025.</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 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Resident #61's Care Plan Report included a focus area, initiated 03/29/2025, that indicated the resident had the right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive. In contrast to the resident's POLST form, a care plan intervention identified that the resident's code status was Attempt Resuscitation - Full Code (initiated 03/29/2025).</p> <p>On 05/08/2025 at 8:55 AM, MDS Coordinator #6 stated all staff had the duty to update a resident's care plan based on a change in condition. He stated a resident's care plan should match their POLST. He noted that resident code statuses were reviewed during clinical meetings. MDS Coordinator #6 stated Resident #61's care plan was not updated with their current code status.</p> <p>On 05/08/2025 at 9:27 AM, the Director of Nursing (DON) stated a resident's care plan should reflect a resident's current POLST.</p> <p>On 05/08/2025 at 9:44 AM, the Administrator stated a resident's care plan should reflect their POLST.</p>		

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide safe and appropriate respiratory care for a resident when needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45555</p> <p>Based on observation, interview, record review, and facility policy review, the facility failed to obtain orders for the use of a non-invasive mechanical ventilator (specifically, continuous positive airway pressure; CPAP) timely, which affected 1 (Resident #184) of 3 residents reviewed for respiratory care .</p> <p>Findings included:</p> <p>A facility policy titled, CPAP/BiPAP [bilevel positive airway pressure] Support, revised 03/2015, directed staff under a Preparation section to 2. Review the physician's order to determine the oxygen concentration and flow and the PEEP [positive end-expiratory pressure] pressure (CPAP, IPAP [inspiratory positive airway pressure] and EPAP [expiratory positive airway pressure]) for the machine.</p> <p>An Admission Record indicated the facility admitted Resident #184 on 04/19/2025. According to the Admission Record, the resident had a medical history that included a diagnosis of chronic diastolic congestive heart failure.</p> <p>An admission Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 04/25/2025, revealed Resident #184 had a Brief Interview for Mental Status (BIMS) score of 13, which indicated the resident had intact cognition. The MDS did not indicate the resident used a non-invasive mechanical ventilator.</p> <p>Resident #184's Care Plan Report did not include information on the use of a non-invasive mechanical ventilator.</p> <p>Resident #184's Cardiology Follow-Up Visit progress note from a hospital visit, dated 03/24/2025, indicated Resident #184 should continue the use of CPAP, and a CPAP company was being contacted. Per the hospital records, Resident #184 was discharged from the hospital on 04/19/2025.</p> <p>Resident #184's medication administration records (MARs) and treatment administration records (TARs), for the timeframe from 04/19/2025 (admission) to 05/07/2025, revealed no evidence of an order for the use of a CPAP machine prior to 05/07/2025.</p> <p>An observation on 05/05/2025 at 10:51 AM revealed a CPAP machine on Resident #184's nightstand with tubing attached, with a mask on the bed above a pillow.</p> <p>An observation on 05/07/2025 at 2:07 PM revealed Resident #184's CPAP machine, with tubing and mask attached, had water in the humidifier chamber. During an interview at the time of the observation, Resident #184 stated they had used the CPAP machine for the last [AGE] years. The resident stated they had not used the CPAP machine in the prior three to four days, but was not sure why.</p> <p>Resident #184's Order Summary Report, for active orders as of 05/07/2025, included the following orders, each with an order date of 05/07/2025:</p> <p>(continued on next page)</p>		

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>-CPAP/APAP (automatic positive airway pressure): setting from 6.0 to 20.0 centimeter of water (cmH20) pressure. Apply at bedtime and remove in the morning upon awakening.</p> <p>-CPAP: replace mask, tubing, accessories, and device upon degradation as needed (PRN).</p> <p>-CPAP: cleanse the reservoir with solution of saline, rinse, and air dry PRN.</p> <p>-CPAP: Empty the reservoir and refill at night with distilled or sterile water at bedtime.</p> <p>-CPAP: Wash mask in warm soapy water, rinse and air dry every day shift.</p> <p>-CPAP: Wash tubing and headgear in warm soapy water, rinse and air dry every day shift on Sunday.</p> <p>During an interview on 05/07/2025 at 4:17 PM, Licensed Vocational Nurse (LVN) #2 stated that if a resident had a CPAP machine, she entered the resident's room when they were ready to go to bed and put distilled water in the humidifier chamber and assisted the resident with putting on their mask as needed. She stated that, other than that, she did not do anything else with CPAP machines. She stated Resident #184 wanted to put on their own CPAP mask, and she had not gone in to determine if the resident had been wearing it lately. She stated she was not aware there were no orders for the use of Resident #184's CPAP machine.</p> <p>During an interview on 05/08/2025 at 9:32 AM, the Director of Nursing (DON) stated orders for the use of a CPAP machine were required, noting the orders should include settings and the care of the equipment. She stated Resident #184's CPAP machine was their own machine. She stated that when she found out about the CPAP machine, she had staff contact the physician and they obtained orders for its use. She stated the resident had no orders for the CPAP machine when they were admitted from the hospital. She stated the resident was not having any distress from not using the CPAP machine.</p> <p>During an interview on 05/08/2025 at 9:52 AM, the Administrator stated staff should confirm any orders for respiratory equipment with the attending physician. He stated communication between nursing staff, admissions staff, family members, and medical staff was needed.</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45555</p> <p>Based on observation, interview, and record review, the facility failed to ensure respiratory equipment (specifically, continuous positive airway pressure; CPAP equipment) was stored appropriately, which affected 1 (Resident #184) of 3 residents reviewed for respiratory care .</p> <p>Findings included:</p> <p>An Admission Record indicated the facility admitted Resident #184 on 04/19/2025. According to the Admission Record, the resident had a medical history that included a diagnosis of chronic diastolic congestive heart failure.</p> <p>An admission Minimum Data Set (MDS), with an Assessment Reference Date (ARD) of 04/25/2025, revealed Resident #184 had a Brief Interview for Mental Status (BIMS) score of 13, which indicated the resident had intact cognition.</p> <p>Resident #184's Care Plan Report did not include information on the use of a non-invasive mechanical ventilator.</p> <p>Resident #184's Order Summary Report, for active orders as of 05/07/2025, included the following orders, each with an order date of 05/07/2025:</p> <ul style="list-style-type: none"> -CPAP/APAP (automatic positive airway pressure): setting from 6.0 to 20.0 centimeter of water (cmH2O) pressure. Apply at bedtime and remove in the morning upon awakening. -CPAP: replace mask, tubing, accessories, and device upon degradation as needed (PRN). -CPAP: cleanse the reservoir with solution of saline, rinse, and air dry PRN. -CPAP: Empty the reservoir and refill at night with distilled or sterile water at bedtime. -CPAP: Wash mask in warm soapy water, rinse and air dry every day shift. -CPAP: Wash tubing and headgear in warm soapy water, rinse and air dry every day shift on Sunday. <p>An observation on 05/05/2025 at 10:51 AM revealed a CPAP machine on Resident #184's nightstand with tubing attached, with an associated mask on the resident's bed above a pillow.</p> <p>An observation on 05/06/2025 at 8:59 AM revealed a CPAP machine on Resident #184's nightstand with the tubing draped over the head of the bed and the mask hanging down behind the bed. Resident #184 was sitting on the side of the bed, and a certified nurse assistant (CNA) was assisting the resident to get ready for the day.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>An observation on 05/07/2025 at 2:07 PM revealed the CPAP machine on Resident #184's nightstand with the tubing attached and the mask on the floor at the head of the bed. The humidifier chamber was full of water. During an interview at the time of the observation, Resident #184 stated they had used the CPAP machine for the last [AGE] years.</p> <p>During an observation and interview on 05/07/2025 at 2:26 PM, Licensed Vocational Nurse (LVN) #1 entered Resident #184's room and verified the CPAP mask was hanging off the bed frame under the head of the bed and that there was no bag to store it in. LVN #1 stated the mask should be stored in a bag when not in use.</p> <p>During an interview on 05/07/2025 at 4:17 PM, Licensed Vocational Nurse (LVN) #2 stated that, if a resident had a CPAP machine, she entered the resident's room when they were ready to go to bed and put distilled water in the humidifier chamber and assisted the resident with putting on their mask as needed. She stated that, other than that, she did not do anything else with CPAP machines.</p> <p>During an interview on 05/08/2025 at 9:52 AM, the Administrator stated staff should follow the appropriate protocol to clean and store CPAP equipment.</p>		