

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055367	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/31/2024
NAME OF PROVIDER OR SUPPLIER Monrovia Gardens Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 615 W. Duarte Rd. Monrovia, CA 91016	

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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40913</p> <p>Based on interview and record review, the facility failed to ensure sufficient nursing staff was available to answer call lights timely and provide care and nursing related services to 2 of 3 sampled residents.</p> <p>This deficient practice resulted in the failure to answer Resident 1's and Resident 2's call lights timely, and Resident 3 to feel nursing service provided was too rushed.</p> <p>Findings:</p> <p>1. During a review of Resident 1's Admission Record (AR), the AR indicated the facility admitted Resident 1 on 4/9/24, with diagnoses that included Stage 4 pressure ulcer (full-thickness skin and tissue loss that exposes bone, tendon, or muscle) of the sacral region (the triangular-shaped bone at the base of the back) and malnutrition (lack of sufficient nutrients in the body).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool) dated 10/11/24, the MDS indicated Resident 1 had intact cognition (ability to think, learn, and remember) and was dependent on staff for toileting hygiene, showering/bathing, personal hygiene, and bed mobility.</p> <p>2. During a review of Resident 2's AR, the AR indicated the facility admitted Resident 2 on 3/23/21, with diagnoses that included heart failure (failure of the heart to provide sufficient blood flow) and diabetes mellitus (DM- a disorder characterized by difficulty in blood sugar control and poor wound healing).</p> <p>During a review of Resident 2's MDS dated [DATE], the MDS indicated Resident 2 had intact cognition and required supervision or touching assistance (helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity) from staff with toileting hygiene, showering/bathing, personal hygiene, bed mobility, and ambulation.</p> <p>3. During a review of Resident 3's AR, the AR indicated the facility admitted Resident 3 on 10/29/19, with diagnoses that included heart failure and type 2 diabetes mellitus.</p> <p>During a review of Resident 3's MDS dated [DATE], the MDS indicated Resident 3 had moderate deficit in cognition. Resident 3 was dependent on staff for toileting hygiene, showering/bathing, and transfers.</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 0725</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 Staff Assignment Sheet dated the following dates:</p> <p>On 11/28/24 during the 11 pm to 7 am shift, there were 4 certified nursing assistants (CNAs) on duty. CNA 1 had 19 residents, CNA 2 had 19 residents, CNA 5 had 24 residents, and CNA 6 had 19 residents assigned to them.</p> <p>On 12/17/24 during the 11 pm to 7 am shift, there were 3 CNAs on duty. CNA 1 had 30 residents, CNA 3 had 27 residents, and CNA 4 had 25 residents assigned to them.</p> <p>On 12/21/24 during the 11 pm to 7 am shift, there were 4 CNAs on duty. CNA 1 had 21 residents, CNA 2 had 23 residents, CNA 3 had 21 residents, and CNA 4 had 21 residents assigned to them.</p> <p>On 12/22/24 during the 11 pm to 7 am shift, there were 3 CNAs on duty. CNA 4 had a written note indicating CNA 4 was off. CNA 1 had 29 residents, CNA 2 had 29 residents, and CNA 3 had 29 residents assigned to them.</p> <p>During an interview on 12/31/24 at 6:30 am with CNA 1, CNA 1 stated when CNA 1's workload would reach 17 residents, CNA 1 stated CNA 1 would try to complete incontinent care, turning and repositioning, but it would be too stressful that CNA 1 would work fast to be able to attend to another resident.</p> <p>During an interview on 12/31/24 at 6:35 am with CNA 4, CNA 4 stated the facility would normally assign 5 CNAs at night when the facility had close to 80 residents. CNA 4 stated when there would be less than 5 CNAs, the call light would keep ringing because the CNAs could not get to the residents on time.</p> <p>During an interview on 12/31/24 at 6:48 am with CNA 3, CNA 3 stated when there would only be 3 CNAs on duty at night, CNA 3 stated the CNAs could provide the care such as incontinent care, turning and repositioning, but the CNAs would get overworked and burned out and the CNAs would end up calling off on the next schedule and it would become a cycle. CNA 3 stated when the workload was high and there were only 3 or 4 CNAs at night, the residents needed to wait longer when they called to be changed since CNA 3 had to finish with another resident. CNA 3 stated when the facility was fully staffed with 5 CNAs at night, CNA 3 would be able to make rounds for incontinent care and turning/repositioning so there would be less call lights not being answered timely.</p> <p>During an interview on 12/31/24 at 7:12 am with CNA 3, CNA 3 stated if the facility would be fully staffed with 5 CNAs on duty, the CNAs would be able to answer call lights on time, and the CNAs could do their job right.</p> <p>During an interview on 12/31/24 at 8:47 am with Resident 2, Resident 2 stated Resident 2 could tell when the CNAs were short staffed because it would take longer for staff to respond to Resident 2's call light. Resident 2 stated the length of wait time varied, but it was longer wait time because Resident 2 could hear the call lights at night.</p> <p>During an interview on 12/31/24 at 9 am with Resident 3, Resident 3 stated when the CNAs were short staffed, the CNAs would inform Resident 3 that the facility was short staffed, and the CNAs would appear mad while working. Resident 3 stated the CNAs would be rushed and as soon as the CNAs completed the incontinent care, the CNAs would be out of the room quickly.</p> <p>(continued on next page)</p>

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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 12/31/24 at 9:36 am with Resident 1, Resident 1 stated all the time it would take time for staff to answer the call light. Resident 1 stated there was a time it took over an hour for staff to answer the call light at night. Resident 1 stated Resident 1 would usually call for a diaper change.</p> <p>During a concurrent interview and record review with the Director of Staff Development (DSD) on 12/31/24 at 10:15 am, the facility's December CNA Monthly Schedule was reviewed. On 12/17/24, CNA 5 had not been working since 12/11/24 and CNA 2 requested to be off, there were no other CNA scheduled to replace the two CNAs. On 12/21/24, CNA 5 had not been working since 12/11/24 and CNA 7 had not been working since 12/1/24. Only 1 CNA was replaced. On 12/22/24, CNA 5 had not been working since 12/11/24 and CNA 4 was off, there were no other CNA scheduled to replace the two CNAs. The DSD stated the facility practice would be for the charge nurse to ask staff from the previous shift if they could stay over or ask staff from the next shift to come in early. The DSD stated the facility would not use registry staff.</p> <p>During a review of the facility's document titled, Requirements of Participation: Facility Assessment (Facility Assessment), dated 8/2024, the Facility Assessment indicated a staffing ratio of one (1) CNA to 12 to 16 residents for night shift.</p> <p>During a review of the facility's policy and procedure (P&P) titled, Staffing, Sufficient and Competent Nursing revised 8/2022, the P&P indicated, Staffing numbers and the skill requirements of direct care staff are determined by the needs of the residents based on each resident's plan of care, the resident assessments and the facility assessment. The P&P indicated, Licensed nurses and certified nursing assistants are available 24 hours a day, seven (7) days a week to provide competent resident care services including:</p> <ol style="list-style-type: none"> a. assuring resident safety; b. attaining or maintaining the highest practicable physical, mental, and psychosocial well-being of each resident; c. assessing, evaluating, planning and implementing resident care plans; and d. responding to resident needs. <p>During a review of the facility's P&P titled, Answering the Call Light, revised 9/2022, the P&P indicated, The purpose of this procedure is to ensure timely responses to the resident's requests and needs. The P&P indicated, Answer the resident call system immediately.</p>		