STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055372	A. Building B. Wing	04/11/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Valley View Post Acute	3111 Santa Anita Ave El Monte, CA 91733

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)
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 42307 Based on observation, interview, and record review, the facility failed to ensure one of three sampled residents (Resident 1), was provided with a comfortable environment by failing to: Maintain hot water temperature of the water faucet in the restroom sink of Resident 1's room (Room A) in accordance with the facility's policies and procedures (P&P) titled, Residential Care Facilities for the Elderly and Accommodation of Needs. This deficient practice resulted in Resident 1 not having hot water to use in the restroom and had the potential for Resident 1 to feel uncomfortable during routine personal care. Findings: During a review of Resident 1's Admission Record (AR), the AR indicated, the facility admitted Resident 1 to the facility on [DATE] with multiple diagnoses including traumatic hemorrhage of cerebrum (bleeding in the largest part of the brain), multiple fractures (a complete or partial break in a bone) of bilateral ribs, and pneumothorax (a collapsed lung). During a review of Resident 1's History and Physical Examination (H&P), dated 1/2/24, the H&P indicated, Resident 1 had the capacity to understand and make decisions. During a review of Resident 1's Minimum Data Set (MDS, an assessment and screening tool), dated 1/2/24, the MDS indicated, Resident 1's cognitive (ability to think and process information) status was moderately impaired. The MDS indicated, Resident 1 required partial/moderate assistance (helper did less than half the effort) with personal hygiene including washing/drying face and hands. During a concurrent interview and record review on 4/11/24 at 11:24 a.m. with the Maintenance Supervisor (MS), the facility's Maintenance Log (ML), dated 3/2024, was reviewed. The ML indicated, on 3/12/24, Room A had no hot water in faucet. The MS stated his duties included maintaining the building and ensuring everything is working properly, including water temperature and finding the solution and fixing whatever was needed. The MS stated Room A's no hot water issue was an easy fix where MS only had to open the hot water valve underneath the sink that someone had closed. (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	During a concurrent observation and interview on 4/11/24 at 11:46 a.m. with the MS, Room A's water faucet temperature in the restroom was checked for five (5) minutes. The temperature fluctuated between 100.5 degrees F (Fahrenheit, the standard scale used to measure temperature in the United States) and 101 degrees F. The MS stated the water felt lukewarm and not hot. The MS stated the hot water temperature should be no less than 105 degrees F and not more than 120 degrees F for resident rooms. The MS stated the residents could be having a cold shower and probably would not be comfortable especially during the winter cold season. The MS stated the MS will check the water heater and double check Room A's water temperature. During an interview on 4/11/24 at 12:47 p.m. with Resident 1, Resident 1 stated Resident 1 used Room A's restroom for bathing and washing. Resident 1 stated the water temperature in Room A's faucet was cold and not hot and wished it were warm. Resident 1 stated, everything else works, it's just the water is cold. During an interview on 4/11/24 at 12:56 p.m. with Certified Nursing Assistant (CNA) 1, CNA 1 stated not having hot water affected the residents because the staff provided bed bath to the residents daily and if the water was too cold and not warm enough, the residents may not want to be bathed and could result in skin breakdown and skin issues and body odor. During an interview on 4/11/24 at 4:24 p.m. with the Quality Assurance Nurse (QAN), the QAN stated not having hot water affected the residents because the water could be cold for the residents and residents could refused to be bathed. During a concurrent observation and interview on 4/11/24 at 4:36 p.m. with the MS, Room A's water faucet temperature in the restroom was checked. The temperature fluctuated between 90 degrees F and 100 degrees F. The MS stated the MS was still currently working on fixing the hot water temperature in Room A. During a review of the facility's undated P&P titled, Residential Care Facilities for the Elderly, the P&P indicated, faucets used by residents for personal care such as shaving and grooming should deliver hot water. The P&P indicated, hot water temperature controls should be maintained to automatically regulate the temperature of hot water used by residents to attain a temperature of not less than 105 degree F and not more than 120 degree F. During a review of the facility's P&P titled, Accommodation of Needs, revised March 2021, the P&P indicated, the facility's environment was directed toward assisting the resident in maintaining and/or achieving safe independent functioning, dignity and well-being. The P&P indicated, the resident's individual needs and preferences were accommodated to the extent possible.