

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055387	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/12/2024
NAME OF PROVIDER OR SUPPLIER Edgewater Skilled Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2625 East Fourth Street Long Beach, CA 90814	

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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>45537</p> <p>Based on interview and record review, the facility failed to ensure one of three sampled resident's (Resident 1) Responsible Party (RP) was assisted in filing a grievance when Resident 1's RP found three tablets of Bictegravir- Emtricitabine-Tenofovir Alafenamide Fumarate 50-200-25 (an anti- human immunodeficiency virus medication) left in Resident 1's 30-day supply for 7/2024.</p> <p>This deficient practice resulted in Resident 1's RP feeling frustrated that concerns related to Resident1's medication administration was not addressed and had the potential for mismanagement of Resident 1's medication regimen.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (Face sheet), the Face Sheet indicated Resident 1 was admitted at the facility on 12/1/2023 with a diagnosis of human immunodeficiency virus disease ([HIV] a condition where a virus attacks the body's immune system) and placement of a Percutaneous Endoscopic Gastrostomy Tube ([PEG] a feeding tube inserted through the stomach to allow a person to receive nutrition and/or medication administration).</p> <p>During a review of Resident 1's Minimum Data Set ([MDS] a standardized assessment and care screening tool), dated 6/6/2024, the MDS indicated Resident 1 was able to make independent decisions that were reasonable and consistent.</p> <p>During a review of Resident 1's Physician's Order Summary, dated 7/2024 the Physician Order Summary indicated Resident 1 was prescribed Bictegravir- Emtricitabine-Tenofovir Alafenamide Fumarate 50-200-25 milligrams ([mg] a unit of measurement) via his PEG.</p> <p>During a telephone interview on 8/9/2024 at 8:26 a.m., Resident 1's RP stated he informed the licensed nurses and the Director of Nursing (DON) that three tablets of Bictegravir- Emtricitabine-Tenofovir Alafenamide Fumarate 50-200-25 were left in Resident 1's 30-day supply for 7/2024 but no one paid attention to his concerns. The RP stated no one told him that he could file a grievance so his concern could be investigated, and he felt devastated about it.</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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a telephone interview on 8/12/2024 at 11:07 a.m., Licensed Vocational Nurse 2 (LVN 2) stated Resident 1's RP approached him and reported that three tablets of Resident 1's HIV medication were left in Resident 1's 30-day supply for 7/2024. LVN 2 stated he did not inform the DON about it nor did he assist the RP to file a formal grievance so that the extra tablets of medication left over from 7/2024 could be addressed.</p> <p>During an interview on 8/12/2024 at 11:40 a.m., Registered Nurse Supervisor 1 (RNS 1) stated she heard Resident 1's RP when he was talking to LVN 2 about the three tablets of HIV medication that were left in Resident 1's 30-day supply for 7/2024. RNS 1 stated she was not able to inform the DON about the RP's concerns and stated she should have directed the RP and/or assisted the RP to file a formal grievance related to his concerns. RNS 1 stated facilitating the residents and their RP's grievances were important so they could identify/provide solution to resident's concerns.</p> <p>During an interview on 8/12/2024 at 1:20 p.m., the Social Services Director (SSD) stated he did not receive a grievance from Resident 1's RP or any information about Resident 1 and the RP's medication concerns. The SSD stated there were grievance forms in a binder at the facility's nursing station and the nursing staff should have let the RP know he could file a grievance and assisted the RP to complete it.</p> <p>During an interview on 8/12/2024 at 2 p.m., the Administrator (ADM) stated all residents, and their responsible parties/families should be encouraged to file a grievance and all staff should assist them to complete one as needed to ensure their concerns were followed up on for a resolution.</p> <p>During a review of the facility's Policy and Procedure (P/P), titled, Grievances revised 12/2023, the P/P indicated the facility should allow the residents a way to execute their right to voice their concerns or grievances without fear of discrimination and retaliation and such grievances include care and treatment and other concerns related to their stay. The P/p indicated the facility must ensure the information on how to file for a grievance is available and the staff make prompt efforts to resolve the residents and their responsible parties' grievances.</p>		