

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055473	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  03/10/2025
NAME OF PROVIDER OR SUPPLIER  New Vista Post-Acute Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1516 Sawtelle Blvd. Los Angeles, CA 90025	

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 0584</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 a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 49571</p> <p>Based on observation, interview, and record review the facility failed to maintain a clean and homelike environment in room [ROOM NUMBER].</p> <p>This deficient practice had the potential for accidents and resulted in the room to be cluttered and disorderly.</p> <p>Findings:</p> <p>During an initial tour of the facility on 3/10/2025 at 9:45 AM, resident room [ROOM NUMBER] was observed with the following:</p> <p>room [ROOM NUMBER] is occupied by three beds.</p> <p>Bed A and B in room [ROOM NUMBER] were open, bed C is occupied by Resident 1.</p> <p>Bed B was covered with blankets to absorb a water leak from the ceiling.</p> <p>Floor next to bed A and B were covered with blankets from ceiling water lead above bed A and B.</p> <p>Wash basins filled with blankets to absorb water leak were on the floor next bed B, and C, and on bed B.</p> <p>During an interview on 3/10/2025 at 10 AM with Resident 1, Resident 1 stated, the ceiling in the room started leaking water a couple of months ago during the rain time. The facility is still looking to find and fix the hole in the ceiling or change the whole roofing. The ceiling is still leaking, it was leaking during the rain a couple of days ago.</p> <p>During a record review, the admission records indicated Resident 2 was initially admitted to the facility on [DATE] and readmitted on [DATE] with a diagnosis of including respiratory failure (a condition in which your blood doesn't have enough oxygen or has too much carbon dioxide), End state renal disease (End Stage Renal Disease-irreversible kidney failure), Epilepsy (a brain disorder where people experience recurring seizures), dependent on dialysis (a treatment to cleanse the blood of wastes and extra fluids artificially through a machine when the kidney(s) have failed).</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 3/10/2025 at 10:25 AM with Licensed Vocational Nurse (LVN) 1, LVN1 stated, room [ROOM NUMBER] has been leaking water from the ceiling for a while. Staff is placing blankets and buckets on the floor to capture the water leaks from the ceiling. LVN1 stated that potential risks for residents and staff include falls/accidents and unknown materials leaking from the paints that can cause harm.</p> <p>During an interview on 3/10/2025 at 2:15 PM with the Director of Nursing (DON), the DON stated, room [ROOM NUMBER] ceiling leak is still under repair and in progress. The DON stated the blankets and basin on bed A , B and on the floor are there to capture water leak from the ceiling.</p> <p>During an interview on 3/10/2025 at 3 PM with the facility Administrator (ADM), ADM stated, the water leak in room [ROOM NUMBER] is being repaired, the roofing work is under progress, and that the ceiling needs painting. The ADM stated that the clutter and water leak in room [ROOM NUMBER] are a potential hazard for falls/accidents.</p> <p>During a record review, an email delivered on 3/12/2025 at 10:54 AM from the facility health services environmental director (ED), indicated, a skylight glass frame that was displaced from the wind causing water to leak between the glass and the frame has been repaired. The area is inspected during the last two rainstorms and the problem has been resolved. The [ED] has inspected the area over room [ROOM NUMBER] during the last rain as well as today ' s (3/12/2025) current rain, there are no current leaks in the areas.</p> <p>During a record review, the facility Policy and Procedures (P&amp;P) titled Maintenance Manual Interior Maintenance, reviewed 7/12 2024, the P&amp;P indicated, It is the policy of this facility to maintain in good repair, all interior surfaces, fixtures, equipment, appliances, and furnishings to provide safe, clean, comfortable environment for residents and employees.</p>