

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055617	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/28/2024
NAME OF PROVIDER OR SUPPLIER  Pasadena Grove Health Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1470 N Fair Oaks Ave Pasadena, CA 91103	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 48152</p> <p>Based on interview and record review, the facility failed to administer prescribed medications to two of three sampled residents (Resident 2 and Resident 3) as ordered by the doctor.</p> <p>These failures resulted in Resident 2 and Resident 3 not receiving their prescribed medication as ordered according to their plan of care.</p> <p>Findings:</p> <p>A review of Resident 2 ' s Admission Record indicated Resident 2 was admitted to facility on 9/23/2023 with diagnoses that include chronic obstructive pulmonary disease (COPD - a lung disease characterized by long-term poor airflow), hypothyroidism (condition when the thyroid gland doesn't make enough thyroid hormones to meet your body's needs), depression (mood disorder that causes a persistent feeling of sadness and loss of interest in life) and anxiety (an intense, excessive, and persistent worry and fear about everyday situations) and schizophrenia (a severe mental illness that causes disturbed or unusual thinking, loss of interest in life, and strong or inappropriate emotions).</p> <p>A review of Resident 2 ' s Minimum Data Set (MDS - a standardized resident assessment care screening tool), dated 4/1/2024, indicated Resident 2 with moderately impaired cognitive skills (the ability to think, remember and reason) and moderate assistance (staff does more than half the effort to complete the activity) with eating, oral and personal hygiene, toileting, dressing and bathing.</p> <p>A review of Resident 2 ' s History &amp; Physical (H&amp;P), dated 1/25/2024, indicated Resident 2 with the capacity to understand and make decisions.</p> <p>A review of Resident 2 ' s Order Summary Report, dated 6/26/2024, indicated the following active orders:</p> <p>a. Aspirin Oral Tablet Chewable 81 milligram (MG - a unit of measurement) (Aspirin) Give 1 tablet by mouth one time a day for cerebral vascular accident (CVA - an interruption in the flow of blood to cells in the brain) PROPHYLAXIS (action taken to prevent disease), start date 9/29/2023.</p> <p>b. Buspirone HCl (Hydrochloric acid- a compound of the elements hydrogen and chlorine) Oral Tablet 5 MG (Buspirone HCl) Give 1 tablet by mouth two times a day for ANXIETY manifested by (M/B) INABILITY TO STAY STILL, start date 9/27/2023.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>c. Colace Oral Capsule 100 MG (Docusate Sodium) Give 2 capsule by mouth two times a day for BOWEL MANAGEMENT DO NOT CRUSH. HOLD FOR DIARRHEA OR LOOSE STOOLS, start date 9/27/2023.</p> <p>d. Cymbalta Oral Capsule Delayed Release Particles 30 MG (Duloxetine HCl). Give 1 capsule by mouth one time a day for DEPRESSION M/B VERBALIZATION OF HOPELESSNESS DO NOT CRUSH, start date 9/27/2023.</p> <p>f. Flonase Allergy Relief Nasal Suspension 50 microgram (MCG - a unit of measurement)/ACT (Fluticasone Propionate (Nasal)) 2 spray in each nostril one time a day for ALLERGY RELIEF. Start date 9/27/2023.</p> <p>g. MiraLAX Oral Packet 17 grams (GM- a unit of measurement) (Polyethylene Glycol 3350) Give 1 packet by mouth one time a day for BOWEL MANAGEMENT HOLD FOR LOOSE STOOLS. DISSOLVE POWDER WITH 4-8 OUNCES (oz- a unit of measurement) WATER PRIOR TO ADMINISTRATION, start date 10/23/2023.</p> <p>h. Pro-Stat Oral Liquid (Amino Acids-Protein Hydrolysate) Give 30 milliliters (ml- a unit of measurement) by mouth two times a day for wound healing, start date 10/8/2023.</p> <p>i. Seroquel Oral Tablet 50 MG (Quetiapine Fumarate) Give 1 tablet by mouth two times a day for SCHIZOPHRENIA M/B AGGRESSIVE BEHAVIOR, start date 9/27/2023.</p> <p>j. Synthroid Oral Tablet 100 MCG (Levothyroxine Sodium) Give 1 tablet by mouth in the morning for HYPOTHYROIDISM, start date 9/27/2023.</p> <p>k. ENSURE TETRAPK/CAN two times a day for supplement 8 ounces provided by nursing, start date 10/8/2023.</p> <p>During an interview on 6/26/2024 at 3:57 PM with Resident 2, Resident 2 stated that he did not receive all his prescribed medication during medication administration from the licensed nurses.</p> <p>During a concurrent record review and interview on 6/27/2024 at 1:43 PM with Registered Nurse Supervisor 1 (RNS 1), Resident 2 ' s Medication Administration Record June 2024, was reviewed and indicated blank entries (undocumented) for the following medication administrations on Saturday 6/15/2024 at 0900:</p> <p>a. Aspirin Oral Tablet Chewable 81 MG (Aspirin) Give 1 tablet by mouth one time a day for CVA PROPHYLAXIS -Order Date- 09/28/2023 2241.</p> <p>b. Buspirone HCl Oral Tablet 5 MG (Buspirone HCl) Give 1 tablet by mouth two times a day for ANXIETY M/B INABILITY TO STAY STILL -Order Date- 09/26/2023 1944.</p> <p>c. Colace Oral Capsule 100 MG (Docusate Sodium) Give 2 capsule by mouth two times a day for BOWEL MANAGEMENT DO NOT CRUSH. HOLD FOR DIARRHEA OR LOOSE STOOLS -Order Date- 09/26/2023 1947.</p> <p>d. Cymbalta Oral Capsule Delayed Release Particles 30 MG (Duloxetine HCl) Give 1 capsule by mouth one time a day for DEPRESSION M/B VERBALIZATION OF HOPELESSNESS DO NOT CRUSH -Order Date- 9/26/2023 1930.</p> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>e. Depakote ER Oral Tablet Extended Release 24 Hour 250 MG (Divalproex Sodium) Give 1 tablet by mouth two times a day for MOOD DISORDER M/B MOOD SWINGS as evident by (AEB) IRRITABLE MOOD -Order Date- 9/26/2023 1955.</p> <p>f. Flonase Allergy Relief Nasal Suspension 50 MCG/ACT {Fluticasone Propionate (Nasal) 2 spray in each nostril one time a day for ALLERGY RELIEF -Order Date-09/26/2023 2018.</p> <p>g. MiraLAX Oral Packet 17 GM (Polyethylene Glycol 3350) Give 1 packet by mouth one time a day for BOWEL MANAGEMENT HOLD FOR LOOSE STOOLS. DISSOLVE POWDER WITH 4--8 OUNCES WATER PRIOR TO ADMINISTRATION -Order Date-10/19/2023 1216.</p> <p>h. Pro-Stat Oral Liquid (Amino Acids-Protein Hydrolysate) Give 30 ml by mouth two times a day for wound healing -Order Date- 10/7/2023 1832.</p> <p>i. Seroquel Oral Tablet 50 MG (Quetiapine Fumarate) Give 1 tablet by mouth two times a day for SCHIZOPHRENIA M/B AGGRESSIVE BEHAVIOR -Order Date-9/26/2023 2024.</p> <p>j. Synthroid Oral Tablet 100 MCG (Levothyroxine Sodium) Give 1 tablet by mouth in the morning for HYPOTHYROIDISM -Order Date- 9/26/2023 2106.</p> <p>k. ENSURE TETRAPK/CAN two times a day for supplement 8 oz provided by nursing -Order Date-10/7/2023 1830.</p> <p>RNS 1 stated these entries were blank, with no documentation to indicate the 9:00 AM medications were administered to Resident 2 on 6/15/2024.</p> <p>A review of Resident 3 ' s Admission Record indicated Resident 3 was readmitted to the facility on [DATE] with diagnoses that included seizures (a sudden disruption of the brain's normal electrical activity accompanied by altered consciousness and/or other neurological and behavioral manifestations), chronic kidney disease (CKD - longstanding disease of the kidneys leading to renal failure), bipolar disorder (a mental illness that causes unusual shifts in mood, energy, and concentration) and chronic obstructive pulmonary disease (COPD - a lung disease characterized by long-term poor airflow).</p> <p>A review of Resident 3 ' s MDS dated [DATE], indicated Resident 3 has moderately impaired cognitive skills, moderate assistance with eating and oral hygiene and maximal assistance (staff does more than half the effort to complete the activity) with dressing, toileting, and personal hygiene.</p> <p>A review of Resident 3 ' s History &amp; Physical (H&amp;P), dated 1/19/2024, indicated Resident 3 had a fluctuating capacity to understand and make decisions.</p> <p>A review of Resident 3 ' s Order Summary Report, dated 6/26/2024, indicated the following active orders:</p> <p>a. Amlodipine Besylate Oral Tablet 5 MG (Amlodipine Besylate) Give 1 tablet by mouth one time a day for hypertension (HTN- high blood pressure) Hold for (systolic blood pressure) (SBP) less than (&lt;) 100, start date 1/15/2024.</p> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>b. Carbamazepine Oral Tablet 200 MG (Carbamazepine) Give 1 tablet by mouth two times a day for SEIZURE DISORDER WITH MEALS, start date 1/24/2024.</p> <p>c. Depakote Oral Tablet Delayed Release 260 MG (Divalproex Sodium) Give 1 tablet by mouth two times a day for SEIZURE DISORDER, start date 1/15/2024.</p> <p>d. Eliquis Oral Tablet 5 MG (Apixaban) Give 1 tablet by mouth two times a day for deep vein thrombosis (DVT- blood clot) PROPHYLAXIS, start date 1/15/2024.</p> <p>e. Gabapentin Oral capsule 100 MG (Gabapentin) Give 1 capsule by mouth three times a day for neuropathy (weakness, numbness, and pain from nerve damage), start date 1/24/2024.</p> <p>f. Levetiracetam Oral Tablet 500 MG (Levetiracetam) Give 1 tablet by mouth two times a day for SEIZURE DISORDER DO NOT CRUSH, start date 1/15/2024.</p> <p>g. Olanzapine Oral Tablet 10 MG (Olanzapine) Give 1 tablet by mouth one time a day for SCHIZOPHRENIA M/B STRIKING OUT AT STAFF, start date 1/15/2024.</p> <p>h. Pro-Stat Sugar Free Oral Liquid (Amino Acids-Protein Hydrolysate) Give 30 ml by mouth one time a day for Protein repletion, start date 1/26/2024.</p> <p>i. Prozac Oral Capsule 10 MG (Fluoxetine HCl) Give 1 capsule by mouth one time a day for DEPRESSION M/B VERBALIZATION OF SADNESS, start date 1/15/2024.</p> <p>j. Risperidone Oral Tablet 2 MG (Risperidone) Give 1 tablet by mouth one time a day for SCHIZOPHRENIA M/B AGGRESSION TOWARDS OTHERS, start date 1/15/2024.</p> <p>During a concurrent record review and interview on 6/27/2024 at 1:55 PM with RNS 1, Resident 3 ' s Medication Administration Record June 2024, was reviewed and indicated blank entries for the following medication administrations on 6/15/2024 at 0900:</p> <p>a. Amlodipine Besylate Oral Tablet 5 MG (Amlodipine Besylate) Give 1 tablet by mouth one time a day for HTN Hold for SBP less than 100 -Order Date- 1/14/2024 1744.</p> <p>b. Carbamazepine Oral Tablet 200 MG (Carbamazepine} Give 1 tablet by mouth two times a day for SEIZURE DISORDER WITH MEALS -Order Date- 1/23/2024 2100.</p> <p>c. Depakote Oral Tablet Delayed Release 250 MG (Divalproex Sodium) Give 1 tablet by mouth two times a day for SEIZURE DISORDER -Order Date- 1/14/2024 1744.</p> <p>d. Eliquis Oral Tablet 5 MG (Apixaban) Give 1 tablet by mouth two times a day for DVT PROPHYLAXIS -Order Date- 1/14/2024 1744.</p> <p>e. Gabapentin Oral capsule 100 MG (Gabapentin) Give 1 capsule by mouth three times a day for neuropathy -Order Date-1/23/2024 2102.</p> <p>f. Levetiracetam Oral Tablet 500 MG (Levetiracetam) Give 1 tablet by mouth two times a day for SEIZURE DISORDER DO NOT CRUSH -Order Date- 1/14/2024 1744.</p> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>g. Olanzapine Oral Tablet 10 MG (Olanzapine) Give 1 tablet by mouth one time a day for SCHIZOPHRENIA M/B STRIKING OUT AT STAFF -Order Date- 1/14/2024 1744.</p> <p>h. Pro-Stat Sugar Free Oral Liquid (Amino Acids-Protein Hydrolysate) Give 30 ml by mouth one time a day for Protein repletion -Order Date- 1/25/2024 2350.</p> <p>i. Prozac Oral Capsule 10 MG (Fluoxetine HCl) Give 1 capsule by mouth one time a day for DEPRESSION M/B VERBALIZATION OF SADNESS -Order Date-1/14/2024 1744.</p> <p>j. Risperidone Oral Tablet 2 MG (Risperidone) Give 1 tablet by mouth one time a day for SCHIZOPHRENIA M/B AGGRESSION TOWARDS OTHERS -Order Date- 1/14/2024 1744.</p> <p>RNS 1 stated there was no documentation on the MAR to indicate 9:00 AM medications were administered to Resident 3 on 6/15/2024. RNS 1 stated licensed nurses should document on the MAR when the medications were administered to the resident. RNS 1 stated it is important for residents to receive their prescribed medications as ordered and if not, the residents ' health or needs would be negatively affected and compromised.</p> <p>During an interview on 6/28/2024 at 10:12 AM with RNS 2, RNS 2 stated he was assigned to Resident 2 and Resident 3 on 6/15/2024 and stated, it might be possible I didn ' t give the meds. RNS 2 stated per facility policy, MAR was not to be left blank, and that he was supposed to document on the MAR when the medications were administered. RNS 2 stated when a resident refuses a medication or a medication was held, a note should be documented indicating medication held or refused. RNS 2 also stated it was important for residents to receive medications as ordered to avoid [health] risks or hospitalization s with risks including [preventable] behavioral problems, high blood pressure or risks of stroke (a serious life-threatening medical condition that happens when the blood supply to part of the brain is cut off) or heart attack (a serious medical emergency in which the supply of blood to the heart is suddenly blocked).</p> <p>A review of facility ' s Policy &amp; Procedure (P&amp;P) titled Medication Administration, revised 11/1/2017, indicated medications are to be administered to the residents according to the physician ' s orders and licensed staff will chart the drug, time administered and initial their name with each medication administration.</p>		