

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 08/22/2024
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 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48143</p> <p>Based on observation and interview, the facility failed to ensure one of five sampled residents (Resident 1) was provided a communication board (a device displaying photos, symbols, or illustrations to help residents with limited language skills express themselves) that was readily accessible with the language Resident 1 was able to understand.</p> <p>This failure had the potential to result in Resident 1 experiencing a delay in receiving appropriate care and treatment, which could result in harm.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record, the Admission Record indicated Resident 1 was admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses that included type 2 diabetes mellitus with chronic kidney disease (high blood sugar level in the blood stream that leads to a gradual loss of kidney function over time), schizophrenia (a chronic, severe mental disorder that affects the way a resident thinks, acts, expresses emotions, perceives reality, and relates to others), dysphagia (difficulty swallowing), and other abnormalities of gait and mobility (unusual walking pattern).</p> <p>During a review of Resident 1's History and Physical Examination (H&P), dated 6/18/24, the H&P indicated the resident has the capacity to understand his medical condition or his bill of rights (a resident's rights and responsibilities).</p> <p>During a review of Resident 1's Minimum Data Set (MDS- a comprehensive assessment and screening tool) dated 6/24/2024, the MDS indicated Resident 1 was moderately impaired with cognitive skills (process of thinking and reasoning) for daily decision making. Resident 1 required partial/ moderate assistance (helper does less than half the effort) for toileting hygiene, shower/self-bath, and upper body dressing. The MDS also indicated Resident 1 required substantial/maximal assistance (helper does more than half of the effort) for transfers.</p> <p>During a review of Resident 1's Communication Care Plan, dated 6/17/2024, the Communication Care Plan indicated Resident 1 had a communication problem related to language barrier with a goal to improve communication function by using a communication board for communication.</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 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 8/22/2024 at 10:48 AM with Resident 1, Resident 1 stated English is not his primary language. Resident 1 stated he speaks a non-English language and only understands very minimal English. Resident 1 stated there is not much verbal communication between himself and the staff. Resident 1 also stated the staff do not use a communication board when conversing with him.</p> <p>During an observation on 8/22/2024 at 11:32 AM in Resident 1's room, there was no communication board observed near the bed, on the bedside table, or inside the drawer of the nightstand.</p> <p>During an interview on 8/22/2024 at 12:50 PM with Certified Nursing Assistant 1 (CNA 1), CNA 1 stated Resident 1 did not have a communication board with Resident 1's primary language. CNA 1 stated it was important to speak with the resident in a language that the resident understands so the staff can identify and attend to the resident's needs.</p> <p>During a concurrent observation and interview on 8/22/2024 at 1:43 PM with the Director of Staff Development (DSD) in Resident 1's room, the DSD confirmed that there was no communication board found around or near the resident's bed, or inside or on top of the resident's bedside nightstand. DSD also stated was not able to find a communication board in Resident 1's former room before Resident 1 moved the current room. DSD stated, it was important to have a communication board at the bedside so that staff could communicate with the resident when needed.</p> <p>During a review of the facility's policy and procedure (P&P) titled, Translation or Interpretation Services, revised June 1, 2021, the P&P indicated, residents with Limited English Proficiency (LEP) or who have hearing deficiencies, have the same access to facility services as other residents. The Facility aids residents with LEP and/or hearing deficiencies through translation and interpretation services. The Facility will notify residents in a format and language he or she understands of available language/communication services. Translation and interpretation services are provided in a way that is culturally relevant and appropriate to the LEP individual. In addition to the use of interpreters and translators, the Facility may use electronic devices, written materials, and communication boards to address language barriers.</p> <p>During a review of the facility's P&P titled, Resident Right- Quality of Life, revised 11/1/2017, the P&P indicated each resident shall be cared for in a manner that promotes and enhances the quality of life, dignity, respect, and individuality. Facility Staff provides care and services that ensure that resident's abilities in activities of daily living, including hygiene, mobility, elimination, dining, communication, speech, language, and other methods of communication do not diminish while in the care of the facility.</p>		