STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055617	A. Building B. Wing	06/23/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Pasadena Grove Health Center	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)
F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to promote dignity and respect for one (1) of nine (9) sampled residents (Resident 1) when Certified Nursing Assistant 1 (CNA 1) stated he had repeated a derogatory word (saying or doing something that is insulting, disrespectful, or meant to belittle someone) in Resident 1's language to the resident and had tossed a pillowcase onto resident's face while playing with Resident 1 on 6/8/2026.This failure had the potential to affect Resident 1 experiencing psychosocial effects (a person's mental, emotional, social and spiritual health) and had the potential to affect the resident's self-esteem, self-worth and violated Resident 1's right to be treated with dignity. Findings:During a review of Resident 1's admission Record, the admission Record indicated the resident was initially admitted to the facility on [DATE] and readmitted [DATE] with diagnoses of dementia (a progressive state of decline in mental abilities) with mood and psychotic disturbance (a mood disturbance affects how you feel [e.g. (for example), extreme sadness or uncharacteristic mania] and a psychotic disturbance affects how you perceive reality) and encephalopathy (any disease, damage, or malfunction that affects the brain's normal structure or function). During a review of Resident 1's Activities Initial Review dated 2/20/2026, Resident 1's Activities Initial Review indicated Resident 1 enjoyed coloring, painting, listening to older music, sitting in the patio and enjoyed wheeling around in the hallway.During a review of Resident 1'S Minimum Data Set (MDS - a resident assessment tool), dated 5/25/2026, the MDS indicated the resident was severely impaired with cognitive (ability to think, remember, and reason) skills for daily decision making. The MDS indicated Resident 1 was dependent (helper does all of the effort. Resident does none of the effort to complete the activity. Or the assistance of 2 or more helpers is required for the resident to complete the activity) with personal hygiene and toileting hygiene (the ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement). It also indicated, Resident 1 needed partial/moderate assistance (helper does less than half the effort) with walking 50 feet with two turns, chair/bed-to-chpillowcasers, going from sitting to standing, putting on/taking off footwear and lower body dressing (the ability to dress and undress below the waist) and the resident needed supervision or touching assistance (helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity) with upper body dressing (the ability to dress and undress above the waist) and eating.During an interview on 6/22/2026 at 3:30 PM with CNA 1, CNA 1 stated on 6/8/2026 he (CNA 1) was playing with Resident 1 in the resident's room by throwing a pillow case up in the air and allowing it to fall onto the resident for the resident to throw back to CNA 1. CNA 1 stated at one point, the pillowcase fell onto the resident's face and at the same time, Resident 1 was saying a derogatory word in the resident's language that CNA 1 did not understand. CNA 1 stated, he knew it was not a good word and had asked Resident 1 to stop saying the derogatory by repeating the word back to the resident. CNA 1 further stated the interaction was witnessed by Licensed Vocational Nurse (LVN) 1 who was walking by in the hallway outside of Resident 1's room.During an interview on 6/23/2026 at 10:10 AM with LVN 1, LVN 1 stated on 6/8/2026 she was walking in the middle hallway and as she was passing by (continued on next page)

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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F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Resident 1's room LVN 1 heard CNA 1 call Resident 1 a derogatory word in the resident's language. LVN 1 stated she then witnessed CNA 1 place a pillowcase on Resident 1's face. LVN 1 stated she did not hear the conversation prior to passing the room and only heard CNA 1 called Resident 1 the derogatory word. LVN 1 further stated CNA 1 had told LVN 1 that CNA 1 was just playing with the resident and explained that is not how a resident should be treated or played with.During an interview on 6/23/2026 at 1:28 PM with Activities Assistant 1 (AA 1) and Activities Assistant 2 (AA 2), both AA 1 and AA 2 stated Resident 1 enjoyed participating in activities such as nail painting, coloring, watching documentaries on the television (TV), playing bingo as well as tossing an inflatable balloon or volleyball in the air. AA 1 and AA 2 stated they focus on age appropriate activities that follow Resident 1's preferences and also stated that throwing a pillowcase in the air to play with the resident is not an age appropriate activity and does not provide Resident 1 with a dignified experience.During an interview on 6/23/2026 at 2:16 PM with the Director of Nursing (DON), the DON stated it is important to provide residents with age appropriate activities that meet the resident's preferences and also take into account the resident's current diagnoses and any behavioral issues the resident might have. The DON stated, tossing a pillowcase up into the air to fall onto the resident is not an activity that is age appropriate for Resident 1 and is not dignified for the resident.During an interview on 6/23/2026 at 2:36 PM with the DON, the DON stated Resident 1 has a behavior of saying a derogatory word in the resident's language to staff, however, it was not okay for CNA 1 to have repeated the word back to the resident even if CNA 1 was telling the resident to stop because whether Resident 1 understood or not, it could have potentially affected Resident 1 emotionally by the resident thinking CNA 1 was saying that word to the resident.During a review of the facility's policy and procedure (P&P) titled, Activities Program, revised 4/1/2021, the P&P indicated its purpose is to encourage residents to participate in activities to make life more meaningful, to stimulate and support physical and mental capabilities to the fullest extent, and to enable the resident to maintain the highest attainable social, physical and emotional functioning.During a review of the facility's P&P titled, Resident Rights, revised 5/1/2023, the P&P indicated: All residents have a right to a dignified existence.The facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment, that promotes maintenance of enhancement of his or her quality of life, recognizing each resident's individuality.During a review of the facility's P&P titled, Privacy and Dignity, revised 5/1/2025, the P&P indicated its purpose is to ensure that care and services provided by the Facility promote and/or enhance privacy, dignity and overall quality of life. The P&P also indicated, the facility promotes resident care in a manner and an environment that maintains or enhances dignity and respect, in full recognition of each residents' individuality, and further indicated under its procedure:Staff promotes residents' self-esteem and self-worth.Staff treat residents with respect including respecting their social status, speaking respectfully, listening carefully.