| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 055906 | A. Building<br>B. Wing | 11/21/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| Rinaldi Convalescent Hospital | 16553 Rinaldi St<br>Granada Hills, CA 91344 |

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 0880<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | Provide and implement an infection prevention and control program.<br><br>Based on observation, interview, and record review, the facility failed to implement infection control practices by failing to ensure Treatment Nurse 1 (TN 1) did not return disposable supplies to the treatment cart and did not disinfect a reusable plastic container prior to returning it to the treatment cart after completing wound treatment for one of one sampled resident (Resident 2).These deficient practices had the potential to result in cross contamination (germs are unintentionally transferred from one substance or object to another with harmful effect) resulting in the potential spread of germs placing residents, staff, and visitors at risk of being infected.Findings:During a review of Resident 2's admission Record, the admission Record indicated the facility admitted the resident on 8/31/2025 with diagnoses that included cellulitis (a skin infection that causes swelling and redness) of left lower leg and diabetes mellitus (DM - a disorder characterized by difficulty in blood sugar control and poor wound healing).During a review of Resident 2's Minimum Data Set (MDS - a resident assessment tool) dated 9/5/2025, the MDS indicated that the resident's cognitive (the mental action or process of acquiring knowledge and understanding through thought, experience, and the senses) skills for daily decision making was intact. The MDS further indicated Resident 2 required maximum assistance with lower body dressing and toilet transfer and required moderate assistance with bed mobility (movement).During a review Resident 2's Order Summary Report, the Order Summary Report indicated an order to cleanse with normal saline solution (NSS - a saltwater solution), pat dry, apply honey fiber (a flexible dressing for direct application to a wound for absorbing exudates [fluid released from a wound]), cover with sterilized adhesive dressing (SAD - a bandage with a clean, germ-free pad in the center and sticky edges that hold it to the skin) one time a day to left lower leg DM ulcer, ordered 9/11/2025.During an observation on 10/24/2025 at 11:20 a.m., in the hallway of Resident 2's room, with TN 1 at the end of wound dressing changes for Resident 2, observed TN 1 return a plastic container containing two opened packs of four (4) inch by four (4) inch (4x4) gauzes, paper tape, and four disposable medicine cups. TN 1 left the plastic container on the top of the bedside table while providing wound treatment for Resident 2. Observed TN 1 did not disinfect the plastic container when returning it to the treatment cart.During a concurrent interview on 10/29/2025 at 11:45 a.m., with the Director of Nursing (DON) and TN 1, the DON stated that TN 1 should not have returned the disposable supplies to the treatment cart, and the plastic container should be disinfected before returning to the treatment cart. When TN 1 was asked why leftover disposable supplies should be discarded, TN 1 stated that the disposable supplies should be discarded to prevent cross contamination. The DON further stated that TN 1 should have enough disposable supplies at bedside before starting a wound treatment to prevent going back and forth from the resident room to the treatment cart and should not return leftover supplies to the treatment cart.During a review of the facility's policy and procedure (P&P) titled, Policies and Practices - Infection Control, last reviewed on 1/30/2025, the P&P indicated, The facility's infection control policies and practices are intended to facilitate maintaining a safe, sanitary and comfortable environment and to help prevent and manage transmission of disease and infections.During a review of the facility's P&P titled, Wound Care, last reviewed on 1/30/2025, the P&P indicated, Wipe reusable supplies with alcohol as indicated (i.e., outside of containers that were touched by unclean hands, scissor blades, etc.) . Take only the<br>(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 0880<br><br>Level of Harm - Minimal harm or potential for actual harm<br><br>Residents Affected - Few | disposable supplies that are necessary for the treatment into the room. Disposable supplies cannot be returned to the cart. |