

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055963	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/21/2024
NAME OF PROVIDER OR SUPPLIER  The Avenues Transitional Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  2043 19th Avenue San Francisco, CA 94116	

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 0636</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Assess the resident completely in a timely manner when first admitted, and then periodically, at least every 12 months.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41545</b></p> <p>Based on interview and record review, the facility failed to ensure the Minimum Data Set (MDS, a resident assessment tool) comprehensive assessment was completed within the required period of 14 days of admission for Resident 1.</p> <p>Failure to complete a comprehensive resident assessment within the required timeframe could result in delayed identification of needs and significant issues that may affect the physical, mental, and psychosocial well-being of Resident 1.</p> <p>Findings:</p> <p>Review of Resident 1's admission record, indicated, was admitted on [DATE] with diagnoses including osteoarthritis (a type of arthritis that occurs when flexible tissue at the ends of bones wears down), repeated falls, liver disease, schizoaffective disorder (a mental health condition characterized primarily by symptoms of schizophrenia and mood disorders), and traumatic brain injury (TBI, an injury usually results from a violent blow or jolt to the head or body).</p> <p>Review of Resident 1's admission MDS assessment with an assessment reference date (ARD, marks the end of a 7 day period during which a resident is observed and assessed) of 2/19/24 indicated, the assessment was completed on 3/6/24, 23 days after admission.</p> <p>During an interview on 5/21/24, at 12:13 PM, the MDS Coordinator (MDSC) stated, admission MDS assessment should be completed on the 14th day of admission. MDSC acknowledged the admission MDS assessment for Resident 1 was late in completion.</p> <p>Review of the Long-Term Care Facility Resident Assessment Instrument 3.0 User's Manual Version 1.18.11, dated October 2023, indicated, .The OBRA (Omnibus Budget Reconciliation Act of 1987) regulations require nursing homes that are Medicare certified, Medicaid certified or both, to conduct initial and periodic assessments for all their residents . The Admission assessment is a comprehensive assessment for a new resident and, under some circumstances, a returning resident that must be completed by the end of day 14, counting the date of admission to the nursing home as day 1 .</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 0636</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of facility policy and procedure titled, Comprehensive Assessments, revised March 2022, indicated, .</p> <p>1. Comprehensive assessments are conducted in accordance with criteria and timeframes established in the Resident Assessment Instrument (RAI) User Manual. 2. Admission Assessment - The Admission assessment is a comprehensive assessment for a new resident and, under some circumstances, a returning resident that must be completed by the end of day 14, counting the date of admission to the nursing home as day 1 if:</p> <p>a. this is the resident ' s first time in this facility, OR</p> <p>b. the resident has been admitted to this facility and was discharged return not anticipated, OR</p> <p>c. the resident has been admitted to this facility and was discharged return anticipated and did not return within 30 days of discharge .</p>		

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<p>F 0655</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 41545</p> <p>Based on interview and record review, the facility failed to ensure baseline care plan was developed within 48 hours of admission for Resident 1.</p> <p>A Baseline Care Plan (BCP) includes minimum healthcare information necessary to properly care for each resident immediately upon their admission, which would address resident-specific health and safety concerns to prevent decline, injury, such as elopement or fall risk, and would identify needs for supervision, behavioral interventions, and assistance with activities of daily living, as necessary.</p> <p>Failure to complete the baseline care plan within the required timeframe could result in delayed identification of needs and significant issues that may affect the physical, mental, and psychosocial well-being of Resident 1.</p> <p>Findings:</p> <p>Review of Resident 1's admission record, indicated, was admitted on [DATE] with diagnoses including osteoarthritis (a type of arthritis that occurs when flexible tissue at the ends of bones wears down), repeated falls, liver disease, schizoaffective disorder (a mental health condition characterized primarily by symptoms of schizophrenia and mood disorders), and traumatic brain injury (TBI, an injury usually results from a violent blow or jolt to the head or body).</p> <p>Review of Resident 5 ' s Minimum Data Set (MDS, a resident assessment tool) dated 2/16/24, indicated, no cognitive (thought process) impairment.</p> <p>Review of Resident 1 ' s Baseline Care Plan Summary (BCPS) dated 2/20/24, indicated, Resident 1 ' s signature and Licensed Vocational Nurse (LVN) electronic signature dated 2/21/24.</p> <p>During concurrent interview and record review on 5/21/24 at 12:13 PM, the MDS Coordinator (MDSC) reviewed Resident 1 ' s BCPS and confirmed the BCPS was completed on 2/21/24. The MDSC stated, Baseline Care Plan should be completed day 8 on admission.</p> <p>Review of facility ' s policy and procedure titled, Care Plans - Baseline, revised March 2022, indicated, A baseline plan of care to meet the resident ' s immediate health and safety needs is developed for each resident within forty-eight (48) hours of admission .</p>