

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  056162	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/12/2024
NAME OF PROVIDER OR SUPPLIER  Extended Care Hospital of Riverside		STREET ADDRESS, CITY, STATE, ZIP CODE  8171 Magnolia Avenue Riverside, CA 92504	

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 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46509</p> <p>Based on interview and record review the facility failed to weigh two of three residents reviewed (Resident A and Resident B), on admission and every week for the first four weeks, to establish a baseline weight. In addition, there was no consistent weight changes monitoring conducted for Resident B.</p> <p>These failures had the potential to result in delayed provision of treatment and care in accordance with professional standards of practice, for Residents A and B.</p> <p>Findings:</p> <p>On June 10, 2024, at 9:00 a.m., an unannounced visit was made to the facility for an allegation of quality of care and treatment.</p> <p>A review of Resident A ' s medical record indicated, Resident A was admitted to the facility on [DATE], with diagnoses which included Type II Diabetes Mellitus (a long-term condition in which the body has trouble controlling blood sugar), Sepsis (a life-threatening complication from an infection), and Alzheimer ' s (set of symptoms memory impairment, thinking skills, behavior changes).</p> <p>A review of Resident A ' s history and physical, dated February 19, 2024, indicated Resident A does not have the capacity to understand and make decisions.</p> <p>A review of Resident A ' s Order Summary Report, indicated .weekly weight monitoring x 4 weeks .</p> <p>A review of Resident A ' s weights indicated the following:</p> <ul style="list-style-type: none"> <li>-On February 20, 2024, initial weight on admission was 173 pounds.</li> <li>-On February 26, 2024, six days later, Resident A ' s weight was 166 pounds, a seven-pound weight loss or 4%.</li> <li>-On March 1, 2024, four days later, Resident A ' s weight was 160 pounds, a six-pound weight loss or 3.6%.</li> <li>-No weight was documented for week three.</li> </ul> <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 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On June 10, 2024, at 3:00 p.m., an interview and concurrent record review was conducted with the RD. The RD stated, the policy for weights on admission or re-admission includes weekly weights times four, a loss or gain of five pounds or 5% in a week is considered significant and the resident needs to be monitored closer. The RD stated a nutritional assessment should be completed within the first two weeks from the resident ' s admitted . Furthermore, the RD stated nutrition progress notes should be added to the resident ' s record for any weight changes, it is important for the RD and the dietary supervisor to keep an eye on weekly weights, especially if there is a weight variance for the resident,. The RD stated they should ask for weekly weight, and there is a book at the nurse ' s station where all weights are recorded. The RD stated, a weight change or nutritional progress note, should be entered weekly with the current weight if a resident continues to lose weight. The RD stated, she cannot find documentation for a weight or nutrition progress note on Resident B after February 7, 2024, Resident B continued to lose weight, and there should be a weekly note, for February14, 2023, and February 21, 2024, but Resident B was not weighed for over two weeks.</p> <p>A review of the facility ' s policy titled Weight Management, dated December 19, 2022, indicated .Based on the resident ' s comprehensive assessment, the facility will ensure that all residents maintain acceptable parameters of nutritional status, such as .weight .electrolyte balance .weight can be a useful indicator of nutritional status. Significant unintended changes in weight .may indicate a nutritional problem .The facility will utilize a systemic approach to optimize a resident ' s nutritional status .Identifying and assessing each resident ' s nutritional status and risk factors, Evaluation/Analyzing the assessment information, Developing and consistently implementing pertinent approaches, Monitoring the effectiveness of interventions and revising them as necessary. A comprehensive nutritional assessment will be completed upon admission on residents to identify those at risk for unplanned weight loss .compromised nutritional status .Information gathered from the nutritional assessment and current dietary standards of practice are used to develop an individualized care plan to address the resident ' s specific nutritional concerns and preferences .A weight monitoring schedule will be developed upon admission for all residents .weights should be recorded at the time obtained .Newly admitted residents-monitor weekly for 4 weeks, Residents with weight loss-monitor weight weekly .The RD will also document weight change notes for residents who have a 5 pound weight loss or gain in 1 month. For weekly weight changes, the RD will complete a weight change note for any resident with a 3% weight loss or gain in 1 week .The registered dietician .should be consulted to assist with interventions; actions are recorded in the nutrition progress notes .</p> <p>A review of the facility ' s policy titled Activities of Daily Living (ADLs), dated December 19,2022, indicated . based on the resident ' s comprehensive assessment and consistent with the resident ' s needs and choices, ensure a resident ' s abilities in ADLs do not deteriorate .eating to include meals and snacks .The facility can provide a maintenance and restorative program including CNAs (certified nursing assistants) to assist the resident in achieving and maintaining the highest practicable outcome on the comprehensive assessment. A resident who is unable to carry out activities of daily living will receive the necessary services to maintain good nutrition .identify resident triggers .to assess causal factors for decline, potential decline .maintain individual objectives of the care plan and periodic review and evaluation .</p>		