

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  056244	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/08/2024
NAME OF PROVIDER OR SUPPLIER  Grand Park Convalescent Hospital		STREET ADDRESS, CITY, STATE, ZIP CODE 2312 West 8th Street Los Angeles, CA 90057	

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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45524</b></p> <p>Based on observation, interview and record review, the facility failed to maintain an infection prevention and control program designed to help prevent the development and transmission of Coronavirus - 19 (COVID-19, COVID, a virus that causes respiratory illness that can spread from person to person) as evidenced by:</p> <ol style="list-style-type: none"> <li>1. Failing to ensure that two of the four sampled residents (Residents 1 and 3) were wearing a mask while interacting with other residents in the hallway and at the nurses station.</li> <li>2. Failing to ensure that Registered Nurse (RN) 1 were wearing N95 respirators (is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles) they were fit tested for (RN 1).</li> </ol> <p>These deficient practices had the potential to place both residents and staff at a risk for infection to COVID-19.</p> <p>Findings:</p> <ol style="list-style-type: none"> <li>1. A review of Resident 1 ' s admission record indicated the resident was initially admitted to the facility on [DATE] and readmitted on [DATE] with diagnoses that included chronic kidney disease (CKD - when your kidneys have mild to moderate damage and aren't filtering waste and extra fluid out of your blood as well as they should. This can lead to a buildup of waste in your body, which can cause other health problems), malignant neoplasm of breast (a disease that occurs when abnormal cells in the breast multiply uncontrollably to form a tumor) and essential hypertension (HTN - elevated blood pressure).</li> </ol> <p>A review of Resident 1 ' s history and physical (H&amp;P- a term used to describe a physician's examination of a patient. The physician obtains a thorough medical history from the patient, performs a physical examination, and then documents their findings) dated 5/7/2024, indicated Resident 1 did not have the capacity to understand and make decisions.</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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A review of Resident 1 ' s Minimum Data Set (MDS-a standardized assessment care screening tool), dated 6/8/2024, indicated Resident 1 had severe cognitive impairments (when someone has difficulty with their ability to think, learn, remember, and make decisions) and substantial/maximal assistance for Activities of Daily Living (ADL- skills required to manage one's basic physical needs) such as eating, oral hygiene, toileting hygiene, personal hygiene, upper/lower body dressing, toilet transfer, and tub/shower transfer.</p> <p>A review of Resident 3 ' s history and physical (H&amp;P- a term used to describe a physician's examination of a patient. The physician obtains a thorough medical history from the patient, performs a physical examination, and then documents their findings) dated 5/7/2024, indicated Resident 1 did not have the capacity to understand and make decisions.</p> <p>A review of Resident 3 ' s admission record indicated the resident was initially admitted to the facility on [DATE] and readmitted on [DATE] with diagnoses that included hyperlipidemia (an excess of lipids or fats in your blood) diabetes mellitus (DM-a chronic condition that affects the way the body processes blood sugar [glucose]), and essential hypertension.</p> <p>A review of Resident 3 ' s MDS dated [DATE], indicated Resident 3 had moderate cognitive impairment (a condition in which people have more memory or thinking problems than other people their age) and required substantial/maximal assistance for ADLs such as eating, oral hygiene, toileting hygiene, personal hygiene, upper/lower body dressing, toilet transfer, and tub/shower transfer.</p> <p>During an observation of Resident 3 on 8/7/2024 at 9:55 am, Resident 3 was observed sitting in a wheelchair opposite the nurses station. Resident was not wearing a mask and was observed sitting next to 4 other residents.</p> <p>During a concurrent observation of Resident 1 and interview with RN 1 on 8/7/2024 at 10:34 am, Resident 1 was observed walking around the unit and back to her room located close to the nurses station without a mask on. Resident stated that she was not aware that she had to wear a mask at all. RN 1 confirmed that both Residents 1 and 3 were both not wearing masks.</p> <p>2. During a concurrent observation and interview of RN 1 ' s N95 respirator on 8/7/2024 at 10:38 am. RN 1 was observed wearing a white respirator that had some black markings around the chin area. RN 1 admitted that she had not been fitted for the respirator that she was wearing but a green one. She stated that the importance of wearing a respirator she was fitted for was to ensure a proper fit which would prevent the spread of Covid 19 infection.</p> <p>During an interview with the Infection Prevention Nurse (IPN) on 8/7/2024 at 12:03 pm, IPN stated that during a Covid 19 outbreak (two or more cases of probable or confirmed COVID-19 in a patient) all residents must wear surgical masks when leaving their rooms to prevent Covid 19 infection. IPN stated that wearing the correct n95 mask that one was tested helped give a proper seal around the nose and mouth to prevent the transmission of Covid 19.</p> <p>(continued on next page)</p>		

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F 0880  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Few	<p>A review of the facility's policy and procedures (P&amp;P) titled Personal Protective Equipment - Contingency and Crisis Use of N-95 Respirators (COVID-19 Outbreak), revised 1/29/2024 indicated, To guide the use of personal protective equipment (PPE) through contingency and crisis capacity strategies when supply is limited. The P&amp;P indicated, all staff must wear fit tested NIOSH (National Institute for Occupational Safety and Health) approved N95 respirators in any indoor space where there are residents who are in Covid 19 isolation or PUI (Patient under investigation- a person who had been in close contact with a person with confirmed infection or/and may have been to place where there is an outbreak).</p> <p>A review of the facility's P&amp;P titled Coronavirus Disease (COVID-19)- Infection Prevention and Control Measures, revised 1/29/2024 indicated under Policy Interpretation and Implementation which included:</p> <p>2. While in the building, personnel are required to strictly adhere to established infection prevention and control policies, including:</p> <ul style="list-style-type: none"> <li>a. hand hygiene.</li> <li>b. respiratory hygiene.</li> <li>c. appropriate use of PPE (Personal Protective Equipment- Gloves, mask, disposable gown).</li> </ul> <p>The same P&amp;P under source control indicated,</p> <ul style="list-style-type: none"> <li>i. Asymptomatic residents are provided cloth face coverings (or facemasks as supplies permit).</li> </ul> <ul style="list-style-type: none"> <li>a. Residents are asked to wear face coverings or masks when they leave their rooms or are around others.</li> <li>b. When residents have to leave their room, they wear a facemask, perform hand hygiene, limit their movement in the facility, and practice physical distancing.</li> </ul>		