

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  056311	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/29/2025
NAME OF PROVIDER OR SUPPLIER  Hollywood Presbyterian Medical Center D/P Snf		STREET ADDRESS, CITY, STATE, ZIP CODE  4636 Fountain Avenue Los Angeles, CA 90029	

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 - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>46333</p> <p>Based on observation, interview, and record review, the facility failed to ensure that proper personal protective equipment (PPE) was supplied and utilized by staff when showering a patient (Patient 1).</p> <p>This deficient practice regarding infection control protocols increases the risk of cross-contamination. Without proper PPE, staff and patients may be exposed to blood, bodily fluids, or other potentially infectious materials, increasing the likelihood of transmitting infections. This poses a potential threat to the safety and health of both patients and staff.</p> <p>Findings:</p> <p>During a review of Patient 1's History and Physical (H&amp;P), dated , the H&amp;P indicated, Patient 1 past medical history and present illness include neuromuscular disease (a wide-range of diseases affecting the peripheral nervous system, which consists of all the motor and sensory nerves that connect the brain and spinal cord to the rest of the body), functional quadriplegia (the complete inability to move due to severe disability or frailty), wheelchair limited since eight years old, severe scoliosis (abnormal lateral curvature of the spine), and mechanical ventilator (a machine that takes over the work of breathing when a person is not able to breathe enough on their own) dependence.</p> <p>During a concurrent observation and interview on 1/29/2025 at 11:15 a.m. with the Director of Nursing (DNS) in the shower room located on the East/South of the subacute ( a level of care that is defined as a level of care needed by a patient who does not require hospital acute care but who requires more intensive licensed skilled nursing care than is provided to the majority of patients in a skilled nursing facility) unit, two staff members (CNA 1 and CNA 2) were showering Patient 1. Patient 1 was lying on a standard gurney rather than an appropriate gurney. Both staff are standing in water, and the entire floor of the shower room was wet. Notably, CNA 1 was not wearing shoes covers, and the bottom of their pants appeared wet. Patient 1 was positioned on their side, with CNA 1 holding onto the torso and shoulder to prevent them from rolling over, while CNA 2 was spraying water on the patient's back. Water was running off the side of the gurney onto CNA 1's shoes. DNS also stated that both shower gurneys had been broken for a few months, which is why the facility had utilized standard gurneys for showering patients. NDS stated today staff will be showering 20 patients. The NDS confirmed that Patient 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, and 14 were showed this morning using the standard gurney.</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:  Facility ID: 056311	If continuation sheet Page 1 of 6

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 1/30/2025 1:06 p.m. with Nursing Director of the subacute unit (NDS), NDS stated both shower gurney was broken and taken out of service since September 2024 (four month ago) the facility could not find a rental and was not able to secure a delivery date for the new shower gurney. NDS also confirmed that there is a safety concern regarding the use of a standard gurney, which is not designed for showering patients. Despite the safety concerns, after discussion with the facility administrator, the decision was made to use the standard gurney as a shower gurney.</p> <p>During an interview on 1/29/2025 at 11:20 a.m. with CNA 3, CNA 3 stated shower gurney had been broken for about four to five months. Using the standard gurney makes it difficult to shower patients safely, and water goes on their feet. Additionally, transferring the patient is not safe.</p> <p>During an interview on 1/29/2025 at 11:30 a.m. with CNA 4, CNA 4 stated during showering, their feet get wet and that it is difficult to transfer patients using the standard gurney.</p> <p>During an interview on 1/29/2025 at 11:30 a.m. with CNA 2, who was observed at 11:15 a.m. showering patient 1, CNA 2 stated that they would be showering 21 patients today. CNA 2 also confirmed that the shower gurney had been broken for over four to five months. Stated the standard gurney complicates safe transfer patient due to the wet floor there is risk of slipping and falling. They mentioned that when their socks become soaked, they have to change them.</p> <p>During a concurrent observation and interview on 1/29/2025 at 11:35 a.m. with CNA 1 in the DNS's office, CNA 1's lower pants appear wet. CNA 1 stated during showering of Patient 1, he went to the bathroom and returned to the shower room but forgot to put on the shoe covers. The shoe covers used by staff were provided by CNA 2. Upon examination, the shoe covers supplied by the facility was found not to be water-resistant and were not made of plastic. The box that the shoe covers come in indicated, Poly-coated . Footwear users should be aware that risk of slipping exists.</p> <p>During an interview on 1/30/2024 at 11:41 a.m. with the Clinical Educator (CES), CES stated they are not aware that the subacute unit is utilizing the standard gurney to shower patients. Stated for safety of the patients and staff appropriate personal protective equipment (PPE, equipment used to prevent or minimize exposure to hazards) must be worn during shower of the patient. CES stated the staff should don gloves, gown, and shoe covers. CES confirmed that PPE should be water-resistant to prevent the staff from getting wet and to minimize the risk of cross-contamination and risk of slipped and fall.</p> <p>During an interview on 1/30/2024 at 12:20 p.m. with the Infection Preventionist (IP), IP stated they are not aware the subacute unit has been utilizing the standard gurney to shower patients. IP stated during the shower process, it is important for staff to don appropriate PPE, such as gown, gloves and shoes protection to prevent getting wet during the shower process. IP stated all PPE worn should be water-resistant, as wet shoes and ankles pose significant issues regarding infection control and increase the risk of cross-contamination.</p> <p>During a review of the facility's policy and procedure (P&amp;P) titled, Personal Protective Equipment (PPE), dated 6/28/2023, the P&amp;P indicated, To establish individual responsibilities to minimize the transmission of transmissible microorganisms to, from, and between patients, and all other persons at Hollywood (name of the facility). To provide a safe environment by preventing the transmission of infectious diseases throughout the facility, and to provide consistent care for all patients regardless of the nature of their illness .</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Standard Precautions: An alternative concept to Universal Precautions that defines all blood, body fluids and substances as infectious. Standard Precautions are used whenever there is a risk of exposure to blood, body fluids, broken skin, mucous membranes and items soiled with other potentially infectious materials (OPIM).</p> <p>Occupational Exposure: Reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials that may result from employees performing their duties. Employees whose job classifications are determined to have occupational exposure to blood or regulated medical waste are responsible for compliance with Standard Precautions procedures.</p> <p>Managers are responsible for providing and maintaining availability of personal protective equipment (PPE), and for ensuring the training of employees regarding PPE. Personal Protective Equipment Protective equipment/supplies will be placed in convenient locations in all patient care areas throughout the medical center.</p> <p>During a review of the facility's policy and procedure (P&amp;P) titled, Infection Prevention Risk Assessment and Plan, dated 2023 , the P&amp;P indicated, The plan serves as the foundation for the prevention, identification, and prevention of healthcare-associated infections through ongoing surveillance, evidence-based intervention, education, and evaluation to effectively improve delivery of health and serve the health needs of caregivers, patients, and visitors within the facility and the surrounding community . Infection Prevention Activities: To identify areas of priority, maintain a system to identify, report, and evaluate infections among patients and hospital caregivers . To communicate Infection Prevention Committee findings and recommendations to appropriate individuals and departments . Employee Centered Responsibilities (in partnership with Employee Health) includes but not limited to the following: Adherence/compliance with infection prevention and control measures and activities. Consultations for infection Prevention issues.</p>		

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<p>F 0908</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Keep all essential equipment working safely.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46333</p> <p>Based on observation, interview, and record review, the facility failed to ensure the safety of fourteen of fourteen sampled Patients (Patient 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, and 14) was compromised when the facility failed to utilize an appropriate shower gurney designed specifically with safety features for use in a wet environment.</p> <p>This deficient practice placed Patient 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, and 14 in an unsafe situation, creating a risk of falling off the gurney, as standard gurneys may lack the necessary safety features to secure a patient during showering. Regular gurneys are not engineered to provide the requisite support for patients in wet conditions. If the gurney becomes slippery due to water exposure, it may not offer adequate stability to keep the patient securely in place.</p> <p>Findings:</p> <p>During a review of Patient 1's History and Physical (H&amp;P), dated , the H&amp;P indicated, Patient 1 past medical history and present illness include neuromuscular disease (a wide-range of diseases affecting the peripheral nervous system, which consists of all the motor and sensory nerves that connect the brain and spinal cord to the rest of the body), functional quadriplegia (the complete inability to move due to severe disability or frailty), wheelchair limited since eight years old, severe scoliosis (abnormal lateral curvature of the spine), and mechanical ventilator (a machine that takes over the work of breathing when a person is not able to breathe enough on their own) dependence.</p> <p>During a concurrent observation and interview on 1/29/2025 at 11:15 a.m. with the Director of Nursing (DNS) in the shower room located on the East/South of the subacute (a level of care that is defined as a level of care needed by a patient who does not require hospital acute care but who requires more intensive licensed skilled nursing care than is provided to the majority of patients in a skilled nursing facility) unit, two staff members (CNA 1 and CNA 2) were showering Patient 1. Patient 1 was lying on a standard gurney. The gurney's side rail was inadequate, featuring bars with approximately twelve-inch gaps, allowing water to flow freely out of these openings as the patient was being showered. There was an absence of barriers at both the head and foot of the gurney.</p> <p>Both staff members were standing in water, and the entire floor of the shower room was soaked. CNA 1 was not wearing shoes covers, and the bottom of their pants appeared damp. Patient 1 was positioned on their side, with CNA 1 holding onto the torso and shoulder to prevent them from rolling while CNA 2 was sprayed water on the Patient1's back. Water was running off the side of the gurney and onto CNA 1's shoes. DNS stated that staff should be wearing shoes covers and confirmed that wet shoes can increase risk for slipping and falling, as well as create infection control issues. DNS also stated that both shower gurneys had been broken for a few months, which is why the facility had utilized standard gurneys for showering patients. NDS stated today staff will be showering 20 patients. The NDS confirmed that Patient 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, and 14 were showerd this morning using the standard gurney.</p> <p>(continued on next page)</p>		

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<p>F 0908</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on /30/2025 at 10:30 a.m. with the Director of Supply Chain Operations (DSCO), the DSCO stated that in September, when both shower gurneys were broken, there was a plan to repair them. However, when the repair engineer arrived on 12/12/2024, they could not locate the broken shower gurneys anywhere in the facility. They then called for rentals but were unsuccessful. The facility subsequently decided to purchase new shower gurneys. An order was placed, but there is no estimated date for when the new shower gurneys will be received.</p> <p>The DSCO stated that the Supply Chain Department does not have records of how many shower gurneys the subacute unit has. Therefore, the order for shower gurneys must indicate STAT (without delay; immediately) to ensure it is prioritized. However, the DSCO stated that there were no orders indicating that the subacute unit needed the shower gurneys on a STAT basis.</p> <p>During an interview on 1/30/2025 1:06 p.m. with Nursing Director of the subacute unit (NDS), NDS stated both shower gurney was broken and taken out of service since September 2024 (four month ago) the facility could not find a rental and was not able to secure a delivery date for the new shower gurney. NDS also confirmed that there is a safety concern regarding the use of a standard gurney, which is not designed for showering patients. Despite the safety concerns, after discussion with the facility administrator, the decision was made to use the standard gurney as a shower gurney.</p> <p>During a review of the facility's policy and procedure (P&amp;P) titled, Environment of Care Safety Management Plan, dated September 2024, the P&amp;P indicated, The Environment of Care (EOC) Safety Management Plan outlines the methods and practices used to design, implement and monitor a program to minimize safety risks for patients and all others who enter (name of the facility) .The EOC Safety Management Plan provides a framework for managing the environment of care and addresses six areas of the environment of care: safety, security, hazardous materials and waste, fire safety, medical equipment and utility systems. Separate management plans are available for the Emergency Management and Life Safety programs. The objective of the EOC Safety Management Plan is to provide a guideline for the development of a safety management program that will enable the hospital:</p> <ul style="list-style-type: none"> <li>o To comply with all relevant safety standards and regulations</li> <li>o To develop or maintain effective program elements that contribute to an overall reduction in workplace injuries and improved patient safety</li> <li>o To improve employee performance through effective safety education and training</li> <li>o To develop standards to monitor, assess, measure and improve EOC performance</li> <li>o To monitor the effectiveness of the safety program</li> </ul> <p>(continued on next page)</p>		

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<p>F 0908</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>A. The CEO is responsible for assuring the existence and effectiveness of a comprehensive safety program by providing the vision, leadership, financial and administrative support to facilitate the ongoing activities of the EOC committee. The CEO shall designate a member of the Executive Staff to serve as the administrative representative on the committee . The EOC Committee oversees and monitors the hospital's safety management program . Subcommittees and working groups may be established to help identify and resolve safety issues .The committee analyzes environment of care issues in a timely manner through monthly and quarterly reports to the committee. The results of data analysis are used to identify opportunities to resolve environmental safety issues. Action is taken on identified opportunities, and changes are evaluated to determine if they have resolved the identified issues .</p> <p>During a review of the operation manual provided by the facility for the standard gurney that was utilized by the facility because their shower gurneys were broken on 9/10/2024 (more than four months and 19 days since both shower gurney was taken out of service) titled [NAME] Operations Manual, not dated, the operation manual indicates that while Model 1015 stretchers can be power washed, it emphasizes that proper procedures must be followed. Key points from the manual include: the stretcher must not be submerged or used inappropriately. Cleaning solutions should not pool on any components. Stretchers must have maintenance performed after a minimum of every fifth washing. Refer to the maintenance manual for specific lubrication instructions . Do not allow cleaning solutions or other fluids to pool on the display unit.</p>		