

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056328	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/27/2025
NAME OF PROVIDER OR SUPPLIER Premier Care Center for Palm Springs		STREET ADDRESS, CITY, STATE, ZIP CODE 2990 East Ramon Road Palm Springs, CA 92264	

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 0727</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.</p> <p>40000</p> <p>Based on interview and record review, the facility failed to ensure a registered nurse (RN) was scheduled for eight consecutive hours in a 24-hour period for November 3, 10, 16, 23, 24, 30, 2024 and December 7, 8, 15, 21, 22, 29, 2024.</p> <p>This facility failure had the potential to result in delayed identification and treatment of life-threatening medical conditions thus compromising the health and safety of the vulnerable population in the facility.</p> <p>Findings:</p> <p>On January 27, 2025, at 8:53 a.m., an unannounced visit to the facility was conducted to investigate nursing services complain.</p> <p>On January 27, 2025, at 11:15 a.m., an interview ws conducted with the Director of Staff Development (DSD). The DSD stated there was an RN who worked during weekends and would be in the facility from 5 a. m. to 7 a.m, and would come back at around 3 p.m. (would work for about three hours). The DSD stated licensed vocational nurses (LVN) would handle issues in the facility while the RN was out, and would notify the Director of Nursing via telephone and would give instructions. The DSD was not aware the facility requires an RN to be in the facility for eight (8) consecutive hours. A concurrent interview and record review was conducted with the DSD.</p> <p>A review of the facility's document titled Daily Assignment and Census Sheet, staffing sign-in log sheet and time card record indicated the following:</p> <ul style="list-style-type: none"> - November 3, 2024 (Sunday), RN worked 6.1 hours; - November 10, 2024 (Sunday), RN worked 6.0 hours; - November 16, 2024 (Saturday), RN worked 6.0 hours; - November 23, 2024 (Saturday), RN worked 6.0 hours; - November 24, 2024 (Sunday), RN worked 6.0 hours; <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 0727</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>- November 30, 2024 (Saturday), RN worked 6.0 hours;</p> <p>- December 7, 2024 (Saturday), RN worked 6.0 hours;</p> <p>- December 8, 2024 (Sunday), RN worked 6.0 hours;</p> <p>- December 15, 2024 (Sunday), RN worked 6.0 hours;</p> <p>- December 21, 2024 (Saturday), RN worked 6.0 hours;</p> <p>- December 22, 2024 (Sunday), RN worked 6.0 hours; and;</p> <p>- December 29, 2024 (Sunday), RN worked 6.0 hours.</p> <p>In a concurrent interview with the DSD, she stated the RN worked only six (6) hours a day during the dates mentioned above. The DSD stated the facility was not compliant with the requirement of having the RN in the facility for eight (8) consecutive hours.</p> <p>On January 27, 2025, at 11:25 a.m., an interview was conducted with the DON. The DON stated there was not enough RN hours to supervise the facility on the dates mentioned above. The DON stated the LVNs who worked on the weekends would call him when there was a need of RN taska and he will assist by giving instructions. The DON stated if the LVNs would not be able to do it, he would travel for about one (1) hour from home to the facility. The DON stated if there were no sufficient RN hours implemented in the facility, there would be a delay of care and would compromise the health and safety of the residents.</p> <p>On January 27, 2025, at 12:20 p.m., an interview was conducted with the LVN. The LVN stated he worked on weekends and if facility needed an RN task, he would call the Director of Nursing (DON). The LVN stated he could not perform interventions that an RN could do so he would wait for an RN to come to the facility. The LVN further stated if there was no RN in the facility, it would cause a delay of identification and treatment of potential life-threatening conditions and could compromise the health and safety of the residents.</p> <p>A review of the facility ' s policy and procedure titled Staffing, Adequate, dated October 2025 (sic), indicated, . It is the policy of this facility to provide adequate staffing to meet the needs of the resident population .The facility maintains adequate staff on each shift to assure that the resident ' s needs are met .</p> <p>A review of the facility ' s job description titled Registered Nurse, indicated, .The primary purpose of your job position is to .meet the physical and psychosocial needs of the resident, in accordance with established medical practices and the requirements of the state and the policies and goals of this facility .This position consistently supports and promotes compliance with the Code of Conduct .adhering to applicable Federal, State, and local laws and regulations, accreditation and licensure requirements .and all policies and procedures .</p>		