

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056330	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/30/2025
NAME OF PROVIDER OR SUPPLIER Reo Vista Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 6061 Banbury St. San Diego, CA 92139	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46235</p> <p>Based on interview and record review, the facility failed to obtain a physician ' s order for a blood sugar fingerstick (a method of measuring blood sugar levels in the blood) in accordance with the facility's policy and procedure and care plan for one of four sampled residents (Resident 4) reviewed.</p> <p>This failure had the potential to affect the delivery of care provided to Resident 4.</p> <p>Findings:</p> <p>On 4/30/25 at 8:45 A.M, an unannounced onsite visit at the facility was conducted related to the care of a resident with diabetes (too much sugar circulating in the blood).</p> <p>Resident 4 was admitted to the facility on [DATE] with diagnoses including diabetes mellitus with hyperglycemia (high blood sugar) according to the facility ' s Admission Record.</p> <p>An interview was conducted with Resident 4 on 4/30/25 at 10:06 a.m. Resident 4 stated she had a diagnosis of diabetes and was checking her blood sugar twice a day when she was at home. Resident 4 stated her blood sugar was also checked when she was at the hospital. Resident 4 stated she got upset with staff because the staff did not know she had diabetes and was not checking her blood sugar. Resident 4 stated the staff started checking her blood sugar before meals after she told them she had diabetes. Resident 4 stated the first time her blood sugar was checked, the result was over 300 (an abnormal high value).</p> <p>A review of Resident 4 ' s physician ' s orders was conducted. The physician ' s orders dated 4/27/25 indicated, .Insulin Lispro [a fast-acting medication that helps regulate blood sugar levels] .inject as per sliding scale .before meals for DM-2 [diabetes mellitus type 2- a long-term condition in which the body has trouble controlling blood sugar] . There was no physician ' s order for checking Resident 4 ' s blood sugar.</p> <p>During a review of Resident 4 ' s care plan dated 4/28/25, the care plan indicated, .Diabetes: Resident has a diagnosis of diabetes and is at risk for complications .Interventions/Tasks .Blood glucose checks as ordered. Report to physician if blood glucose is outside set parameters .</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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A joint record review and interview on 4/30/25 at 12:03 P.M. was conducted with Licensed Nurse (LN) 1. LN 1 reviewed Resident 4 ' s physician ' s orders in the electronic medical record (EMR) and stated Resident 4 was receiving insulin. LN 1 stated there was no order to check Resident 4 ' s blood sugar prior to administering the insulin. LN 1 stated even without a physician ' s order; the medication nurses still checked Resident 4 ' s blood sugar because Resident 4 was on insulin. LN1 further stated, a physician ' s order was needed for resident safety and to provide a reason for the use of the insulin.</p> <p>During an interview on 4/30/35 with a Nurse Practitioner (NP) at the facility, the NP stated it was expected for nursing staff to write a separate order for a blood sugar fingerstick. The NP further stated the EMR should show a separate blood sugar check order.</p> <p>An interview was conducted on 5/1/25 at 2:18 P.M. with LN 2. LN 2 stated if a resident was admitted to the facility with insulin orders but without an order for blood sugar fingerstick, the nursing staff will call the physician to obtain an order. LN 2 stated an order was needed to monitor the resident ' s blood sugar levels. LN 2 stated that a physician ' s order was needed to obtain a resident ' s blood sugar fingerstick.</p> <p>During an interview on 5/1/24 at 3:13 P.M. with the Director of Nursing (DON), the DON stated a blood sugar fingerstick was an invasive procedure and it required a physician ' s order.</p> <p>A review of the facility ' s policy and procedure (P&P) titled, Obtaining a Fingerstick Glucose Level, dated October 2011 was conducted. The P&P indicated, .The purpose of this procedure is to obtain a blood sample to determine the resident ' s blood glucose level .Preparation 1. Verify that there is a physician ' s order for this procedure .</p>		