

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056425	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/18/2024
NAME OF PROVIDER OR SUPPLIER Villa Elena Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 13226 Studebaker Rd Norwalk, CA 90650	

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 0553</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Allow resident to participate in the development and implementation of his or her person-centered plan of care.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45425</p> <p>Based on interview and record review, the facility failed to implement the facility's policy to provide an Interdisciplinary Team Meeting (IDT- a group of professional and direct care staff that have primary responsibility for the development of a plan of care for an individual receiving services) for four of four sampled residents (Resident 1, 2, 3 and 4) when Resident 1, 2, 3, and 4 had physician orders to go out on pass for therapeutic purposes.</p> <p>This deficient practice violated Resident 1, 2, 3, and 4's right or the resident representatives' right to participate in the development of the plan of care.</p> <p>Findings</p> <p>During a review of Resident 1's Admission Record, the record indicated Resident 1 was admitted on [DATE] with the diagnosis including major depressive disorder (a mood disorder that causes a persistent feeling of sadness and loss of interest).</p> <p>During a review of Resident 1's Minimum Data Set ([MDS]- a standardized assessment and care screening tool) dated 5/20/2024, the MDS indicated Resident 1 had intact cognition (the mental action or process of acquiring knowledge and understanding through thought, experience, and the senses).</p> <p>During a review of Resident 1's History and Physical (H&P) dated 5/14/2024, the H&P indicated Resident 1 had the ability and capacity to make decisions.</p> <p>During a review of Resident 1's Physician Order dated 5/18/2024, the order indicated Resident 1 may go out on pass with family.</p> <p>During a review of Resident 2's Admission Record, the record indicated Resident 2 was admitted on [DATE] with the diagnosis including abnormalities of gait (walking) and mobility.</p> <p>During a review of Resident 2's MDS dated [DATE], the MDS indicated Resident 2 had intact cognition.</p> <p>During a review of Resident 2's physician order dated 2/10/2024, the order indicated Resident 2 may go out on pass for maximum four hours with supervision/responsible party and may take medications.</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0553</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of Resident 3's Admission Record, the record indicated Resident 3 was admitted on [DATE] with the diagnosis including dementia (impaired ability to remember, think, or make decisions that interferes with doing everyday activities).</p> <p>During a review of Resident 3's MDS dated [DATE], the MDS indicated Resident 3 had intact cognition.</p> <p>During a review of Resident 3's physician order dated 5/02/2024, the order indicated Resident 3 may go out on pass with family.</p> <p>During a review of Resident 4's Admission Record, the record indicated Resident 4 was admitted on [DATE] with the diagnosis including human immunodeficiency virus ([HIV]- virus that infects and destroys the cells of the immune system).</p> <p>During a review of Resident 4's MDS dated [DATE], the MDS indicated Resident 4 had intact cognition.</p> <p>During a review of Resident 4's physician order dated 6/9/2024, the order indicated Resident 4 may go out on pass, not to exceed four hours with companion.</p> <p>During an interview on 6/18/2024 at 9:13 a.m. with the Director of Nursing (DON), the DON could not find any documentation of IDT meetings for Resident 1, 2, 3 and 4 regarding the residents participating in going out on pass. The DON stated that she was not aware of the facility's policy regarding holding IDTs prior to having residents participate in going out on pass. The DON stated its important to have IDTs prior to the residents going out on pass to ensure the residents and their representatives understand the process of going out on pass, the members of the IDT can assess resident and/or resident representative's understanding of the process, and if they are able to fully participate in the needs of the resident such as providing medications when out on pass.</p> <p>During a review of the facility's policy titled Out on Pass dated 10/01/2023, the policy indicated when a resident requests to go out on pass, the IDT will assess the resident's ability to participate in activities outside the facility, while taking into consideration the resident's decision-making capacity, physical disabilities, and ability to take medications independently. The policy indicated the IDT assessment will be documented in the IDT notes.</p>		