

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056456	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/25/2024
NAME OF PROVIDER OR SUPPLIER Palazzo Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 5400 Fountain Ave 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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 36395</p> <p>Based on interview and record review the facility failed to ensure the transfer records from the general acute hospital (GACH 1) were reviewed thoroughly for one of two sampled residents (Resident 1). For Resident 1, who had appointments arranged by the general acute hospital (GACH 1) for vascular diagnostic (a test used to determine possible circulation problems of the blood vessels), chemotherapy (use of drugs to destroy cancer cells), hematologist (medical doctor who had special training in diagnosis and treating blood disorders) and pulmonologist (medical doctor who had special training in diagnosing and treating diseases of the lungs (body organ that helps with breathing) prior to Resident 1's transfer and admission to the facility on [DATE], the facility failed to:</p> <ol style="list-style-type: none"> 1. Thoroughly review Resident 1's GACH 1 transfer record when the facility admitted Resident 1 on 3/16/24. 2. Notify Resident 1's physician about Resident 1's appointments arranged by the GACH 1 to make decisions whether to continue with the treatment and diagnostics. <p>These deficient practices resulted in delay of treatment for Resident 1 due to the missed appointments on 3/18/24, 3/21/24, 3/26/24, 3/28/24, 4/2/24, 4/10/24, 4/11/24, 4/18/24 and 4/25/24.</p> <p>Findings:</p> <p>During a review of the Admission Record indicated the facility admitted Resident 1 on 3/16/24 with diagnoses including multiple myeloma (blood cancer that develops in the plasma cells (white blood cells that protect the body from infection), anemia and difficulty in walking.</p> <p>During a review of the Minimum Data Set (MDS, standardized care and health screening tool) dated 3/23/24 indicated Resident 1 had impaired cognition (ability to think and reason). Resident 1 needed substantial assistance (helper does more than half the effort) with putting on/taking off footwear, lower body dressing, shower, toileting hygiene, moderate assistance (helper does less than half the effort) with upper body dressing, oral hygiene, and supervision with eating.</p> <p>During a review of the GACH 1 Inpatient Progress Note dated 3/15/24 indicated Resident 1 had follow-up appointments as follows:</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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>1. Vascular diagnostic on 3/18/24 at 1 p.m.; 2. Vascular diagnostic on 3/21/24 at 1 p.m.; 3. Infusion chemotherapy for three hours on 3/21/24 at 2 p.m.; 4. Vascular Surgery return on 3/26/24 at 8:30 a.m.; 5. Adult primary care on 3/26/24 at 10:20 a.m.; 6. Infusion chemotherapy for 5 hours on 3/28/24 at 8:30 a.m.; 7. Hematologist on 4/2/24 at 1:30 p.m.; 8. Pulmonologist on 4/10/24 at 2:45 p.m.; 9. Infusion chemotherapy for five hours on 4/11/24 at 8:30 am.; 10. Infusion chemotherapy for three hours on 4/18/24 at 9 am; 11. Infusion chemotherapy for five hours on 4/25/24 at 8:30 am.; 12. Infusion chemotherapy for five hours on 5/9/24 at 8:30 a.m.; 13. Infusion chemotherapy for three hours on 5/16/24 at 9 a.m. and 14. Infusion chemotherapy for five hours on 5/23/24 at 8:30 a.m.</p> <p>During an interview and concurrent review on 4/23/24 at 1:27 p.m., Resident 1's GACH 1 Inpatient Progress Note was reviewed with the director of nursing (DON). During concurrent interview, the DON stated the GACH 1 called the facility and gave report about Resident 1 prior to admission on 3/16/24. DON stated GACH 1 did not inform the facility that Resident 1 had appointments. DON stated the registered nurse (RNS) that admitted Resident 1 did not review the inpatient progress notes that had Resident 1's appointments but used the other pages with medications to transcribe the admission orders and verify with Resident 1's primary physician.</p> <p>During an interview on 4/25/24 at 3:48 p.m., RNS 1 stated GACH 1 records should be reviewed on admission to find out what is relevant such as allergies, diagnoses, and appointments. RNS 1 stated if there are appointments the social services will be notified to set up the transportation.</p> <p>During a review of the facility Policy titled Charting and Documentation reviewed on 1/18/24 indicated documentation in the medical record will be objective (not opinionated or speculative) complete and accurate.</p> <p>During a review of the facility Policy titled Admission reviewed on 1/18/24 indicated preliminary resident information shall be documented upon a resident's admission to the facility. The same Policy indicated this initial information-gathering precedes the complete history and physical assessment that also accompanies the resident admission process.</p> <p>During a review of the facility Policy titled Resident Rights reviewed on 1/18/24 indicated the resident has the right for communication with and access to people and services, both inside and outside the facility.</p>