

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555057	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/23/2024
NAME OF PROVIDER OR SUPPLIER Las Flores Convalescent Hospital		STREET ADDRESS, CITY, STATE, ZIP CODE 14165 Purche Ave. Gardena, CA 90249	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49906</p> <p>Based on interview and record review, the facility failed to ensure four of four sampled residents (Residents 1, 7, 8, and 9) was treated with respect and dignity when Certified Nurse Assistant (CNA 4):</p> <ol style="list-style-type: none"> 1. Acted rudely and spoke to Resident 1 in a demanding voice during care. 2. Refused to stay with Resident 7 when the resident asked the CNA to wait for her while having a bowel movement. 3. Spoke loudly towards Resident 8. 4. Spoke in a harsh tone towards Resident 9 and repositioned the resident in a fast and hurried way. <p>This deficient practice violated the resident's rights to be treated with respect and dignity and had the potential to negatively affect the self-esteem and psychosocial well-being of the residents.</p> <p>Findings:</p> <p>During a Review of Resident 1 ' s Admission Record, the Admission Record indicated Resident 1 was admitted to the facility on [DATE] and readmitted on [DATE]. Resident 1 ' s diagnoses included diabetes mellitus ([DM] a disorder characterized by difficulty in blood sugar control and poor wound healing), and dysphagia (difficulty swallowing).</p> <p>During a review of Resident 1 ' s Minimum Data Set ([MDS], a federally mandated resident assessment tool) dated 9/6/2024, the MDS indicated Resident 1 was able to understand and was usually understood by others. The MDS indicated Resident 1 was dependent (staff did all the effort) for Activities of Daily Living (ADLs) such as toileting hygiene, dressing and transfers.</p> <p>During an interview on 10/22/2024 at 11:40 a.m. with Resident 1, Resident 1 stated, CNA 4 was rude to her, and spoke to her in a demanding voice when CNA 4 would change her. Resident 1 stated, CNA 4 was mean, and she did not like her attitude.</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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a Review of Resident 7 ' s Admission Record, the Admission Record indicated Resident 7 was admitted to the facility on [DATE] and readmitted on [DATE]. Resident 7 ' s diagnoses included muscle weakness and dysphagia.</p> <p>During a review of Resident 7 ' s MDS dated [DATE], the MDS indicated Resident 7 was able to understand was usually understood by others. The MDS indicated Resident 7 required partial/moderate assistance (staff less than half the effort. Staff lifts, holds, or supports trunk or limbs but provides less than half the effort) for ADLs such as bed mobility (ability to roll from lying on back to left and right side on the bed) and transfers.</p> <p>During an interview on 10/23/2024 at 11:00 a.m. with Resident 7, Resident 7 stated CNA 4 sometimes would get upset when assisting her. Resident 7 stated, CNA 4 complained a lot and was harsh with her and Resident 9 (Resident ' s roommate). Resident 7 stated she would hear CNA 4 talk loudly to Resident 9 and was not nice to the resident. Resident 7 stated, she asked CNA 4 to wait for her (Resident 7) while having a bowel movement and CNA 4 told the resident no, she could not stay and wait for her.</p> <p>During a Review of Resident 8 ' s Admission Record, the Admission Record indicated Resident 8 was admitted to the facility on [DATE] and readmitted on [DATE]. Resident 8 ' s diagnoses included major depressive disorder (a mood disorder that causes a persistent feeling of sadness and loss of interest) and schizophrenia, (a mental illness that is characterized by disturbances in thought).</p> <p>During a review of Resident 8 ' s MDS dated [DATE], the MDS indicated Resident 8 was able to understand and be understood by others. The MDS indicated Resident 8 required supervision or touching assistance (staff provides verbal cues and/or touching/steadying and/or contact guard assist as resident completes activity) for ADLs such as transfers and walking.</p> <p>During an interview on 10/23/2024 at 11:10 a.m. with Resident 8, Resident 8 stated CNA 4 was sometimes assigned to her, and CNA 4 had a harsh personality. CNA 4 stated her words sounded mean and was loud towards residents including her roommate (Resident 9).</p> <p>During a Review of Resident 9 ' s Admission Record, the Admission Record indicated Resident 9 was admitted to the facility on [DATE] and readmitted on [DATE]. Resident 9 ' s diagnoses included hemiplegia (total paralysis of the arm, leg, and trunk on the same side of the body) and hemiparesis (muscle weakness or partial paralysis) affecting left side and epilepsy (a chronic brain disorder that causes seizures, which are abnormal electric discharges in the brain).</p> <p>During a review of Resident 9 ' s MDS dated [DATE], the MDS indicated Resident 9 was able to understand and be understood by others. The MDS indicated Resident 9 was dependent on staff for ADLs such as toileting, personal hygiene, and lower body dressing.</p> <p>During an interview on 10/23/2024 at 12:00 p.m. with Resident 9, Resident 9 stated, CNA 4 was always working and was not nice to her. Resident 9 stated, CNA 4 was harsh when speaking to her during care and felt CNA 4 did not like her. Resident 9 stated, CNA 4 was fast when she repositioned the resident.</p> <p>(continued on next page)</p>		

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<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of the facility ' s Policy and Procedure, titled Resident Rights dated 5/1/2023, the P&P indicated the facility must treat each resident with respect, dignity, and care for each resident in a manner and in an environment, that promotes maintenance or enhancement of his or her quality of life, recognizing each resident ' s individuality.</p>

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>49906</p> <p>Based on observation and interview, the facility failed to ensure Dietary staff followed proper sanitation practices in the kitchen by not sweeping and mopping the kitchen floors as indicated on the Cleaning Schedule.</p> <p>This deficient practice had the potential to result in attracting pests in the kitchen and contamination of food served to the residents.</p> <p>Findings:</p> <p>During an observation on 10/22/2024 at 11:30 a.m., in the kitchen, food residue, dirt, and other debris on the floors behind black cabinets, behind and on the side of the dish washing machine, under the sink, under the refrigerator, and under and on the side of the stove were observed.</p> <p>During an interview on 10/23/2024 at 11:19 a.m., with the Dietary Aid (DA), the DA stated the daily assigned dishwasher would sweep after washing the dishes. The DA stated if the kitchen floor was not cleaned well, resident ' s food could become contaminated and could attract bugs.</p> <p>During a concurrent record review and interview on 10/23/2024 at 11:33 a.m., with the Dietary Supervisor (DS), surveyor pictures of the kitchen were reviewed. The DS stated some areas in the kitchen did not appear to have been cleaned daily.</p> <p>During a review of the facility ' s Daily Cleaning Schedule Sanitation and Maintenance dated 9/1/2024-10/25/2024, the Cleaning Schedule indicated directions which included DS assigned duties and Dietary staff initialed each box daily, after completing task and before clocking out. The Cleaning Schedule indicated a line item titled Floor swept, mopped with Frequency to be completed 3 times daily. There was no supporting documentation to indicate the floors were swept and mopped on 9/8/2024, 9/29/2024, 9/30/2024, 10/2/2024, 10/3/2024, 10/4/2024, and 10/5/2024-10/12/2024.</p> <p>During a review of the facility ' s Policy and Procedure (P&P), titled, Cleaning Schedule dated 5/1/2018, the P&P indicated, dietary staff will maintain a sanitary environment in the dietary department by complying with the routine cleaning schedule developed by the Dietary Manager.</p>		