STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555065	A. Building B. Wing	04/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
View Park Convalescent Center	3737 Don Felipe Drive Los Angeles, CA 90008

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)
F 0760 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure that residents are free from significant medication errors. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45528 Based on observation, interview and record review, the facility failed to ensure one of three sampled residents (Resident 3) was free of significant medication error. This deficient practice had the potential to lead ineffective medication therapy, and result overdose or underdose, which could be fatal to Resident 3. Findings: A review of Resident 3's Admission Record indicated Resident 3 was initially admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses that included adult failure to thrive and dementia (impaired ability to remember, think or make decisions that interferes). A review of Resident 3's Physician Orders, dated 12/29/2023, indicated an active order for Aspirin (medication used to reduce the risk of blood clots) tablet (a drug in solid form taken by mouth) chewable, (to) give 1 tablet via gastrointestinal tube (G-tube -a tube inserted through the belly that brings nutrition directly to the stomach) one time a day for cardiac (heart) prophylaxis (prevent something from happening). A review of Resident 3's Minimum Data Set (MDS - a standardized assessment and care-screening tool), dated 1/12/2024, indicated Resident 3 had impaired cognition (when a person has trouble remembering, learning new things, concentrating, or making decisions that affect their everyday life) and dependent on staff for activities of daily living (ADLs - feeding, toilet use, oral hygiene, and personal hygiene). During a concurrent observation, interview, and record review with Licensed Vocation Nurse 1 (LVN 1) during medication administration on 4/3/2024, at 9 AM, Resident 3's physician's order for Aspirin dated 12/29/2023, was reviewed. LVN 1 stated, there was no dosage on the Aspirin in the computer, it just says chewable aspirin, so we give the 81miligrams (mg -unit of measure). That's just how we do it. LVN 1 further stated a complete medication order should have, the name of the medication, dosage and route of administration. LVN 1 stated, Potential adverse outcome of giving an incomplete order may lead to medication not having any effect at all or cause an overdose of the medication which may be fatal to the resident. (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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F 0760 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	During an interview with Director of Nursing (DON) on 4/4/2024 at 5:37 PM, DON the pharmacist did not complete the Medication Regimen Review (MRR) for Aspirin for Resident 3. DON stated the dosage for Aspirin should have been completed. DON stated adverse outcome for not having the dosage for Aspirin could result Aspirin overdose or under dose. DON stated the facility did not call Resident 3'sphysician to clarify the right order for Aspirin. DON stated, we just called today, someone should have called to get the right dose for the medication. A review of the facility's policy and procedures titled Labeling of Medication Containers, revised 2/20/2024 indicated, All medications maintained in the facility are properly labeled in accordance with current state and federal guidelines and regulations . Follow the manufacturer's instructions on the expiration date once opened.