

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555116	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/05/2024
NAME OF PROVIDER OR SUPPLIER Rosewood Health Facility		STREET ADDRESS, CITY, STATE, ZIP CODE 1401 New Stine Road Bakersfield, CA 93309	

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 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure residents do not lose the ability to perform activities of daily living unless there is a medical reason.</p> <p>50409</p> <p>Based on observation, interview, and record review, the facility failed to provide ADL (Activities of Daily Living [tasks people do to manage one's basic needs, including personal hygiene or grooming, dressing, toileting, transferring or ambulating, and eating]) care assistance for one of four sampled residents (Resident 2) when Resident 2's fingernails were not cleaned and trimmed. This failure had the potential to result in Resident 2 developing infection due to the spread of germs from fingernails.</p> <p>Findings:</p> <p>During a review of Resident 2's Admission Record (AR), dated 9/4/24, the AR indicated, Diagnosis Information. Need for assistance with personal care.</p> <p>During a concurrent observation and interview on 9/5/24 at 10:45 a.m. with Resident 2 in Resident 2's room, Resident 2 had dark gray debris underneath her long fingernails. Resident 2 stated her fingernails had not been cleaned and trimmed for days. Resident 2 stated, They're (fingernails) quite long and sharp. Resident 2 stated she needs assistance with cleaning and trimming her fingernails.</p> <p>During a review of Resident 2's Minimum Data Set (MDS [An assessment tool]), dated 8/8/24, the MDS indicated Resident 2 had a BIMS (Brief Interview for Mental Status) score of 15 (score of 13-15 indicates a resident is cognitively intact).</p> <p>During an interview on 9/5/24 at 10:49 a.m. with Certified Nursing Assistant (CNA) 1, CNA 1 stated Resident 2 had long fingernails.</p> <p>During a review of Resident 2's CNA Weekly Skin Report (CWSR), dated 8/26/24-9/2/24, the CWSR indicated:</p> <ul style="list-style-type: none"> a. On 8/26/24, Resident 2 refused nail care. b. On 8/27/24 and 8/28/24, there was no documentation of nail care provided for Resident 2. c. On 8/29/24, nail trimming was not applicable or not needed for Resident 2. d. On 8/30/24 to 9/1/24, there was no documentation of nail care provided for Resident 2. <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 0676</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>e. On 9/2/24, nail trimming was not applicable or not needed for Resident 2.</p> <p>During a concurrent interview and record review on 9/6/24 at 2:12 p.m. with Director of Nursing (DON), Resident 2's ADL flowsheet, dated September 2024 was reviewed. The ADL flowsheet indicated no documentation of daily cleaning and regular trimming of Resident 2's fingernails. DON stated, It (Nail care) is not there (ADL flowsheet).</p> <p>During a review of the facility's policy and procedure (P&P) titled, Fingernails/Toenails, Care of, dated February 2018, the P&P indicated, The purposes of this procedure are to clean the nail bed, to keep nails trimmed, and to prevent infections. Nail care includes daily cleaning and regular trimming.</p> <p>During a review of the facility's P&P titled, Activities of Daily Living (ADL), Supporting, dated 2001, the P&P indicated, Residents who are unable to carry out activities of daily living independently will receive the services necessary to maintain good nutrition, grooming and personal and oral hygiene.</p>		

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<p>F 0790</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide routine and 24-hour emergency dental care for each resident.</p> <p>50409</p> <p>Based on interview and record review, the facility failed to ensure the facility's policy and procedure (P&P) on dental services was followed for one of four sampled residents (Resident 1). This failure had the potential to result in Resident 1's weight loss due to difficulty eating.</p> <p>Findings:</p> <p>During a review of Resident 1's Missing Property Report (MPR), dated 5/23/24, the MPR indicated Resident 1's family reported Resident 1's bottom dentures was missing. The MPR indicated, 6-6-24 facility is coordinating (with) Lumina Dental for eval (evaluation) on replacement of bottom dentures.</p> <p>During a review of Resident 1's medical records (MR), dated 5/23/24 to 6/24/24, the MR indicated no documentation of what the facility had done to ensure Resident 1 was able to eat and drink adequately while awaiting the dental services.</p> <p>During a review of Resident 1's meal intake log (MIL), dated May 2024, the MIL indicated:</p> <ul style="list-style-type: none"> a. On 5/23/24, Resident 1 had 25% meal intake during breakfast, lunch, and dinner. b. On 5/24/24, Resident 1 had 75% meal intake during breakfast and lunch, and less than 25% meal intake during dinner. c. On 5/25/24, Resident 1 had 0% meal intake during breakfast, 50% meal intake during lunch, and less than 25% meal intake during dinner. <p>During a concurrent interview and record review on 9/4/24 at 2:23 p.m. with Social Services Director (SSD), Resident 1's Dental Notes (DN), dated 6/25/24 was reviewed. The DN indicated, FLD (Full Lower Dentures) Missing. SSD stated Resident 1 was seen by the dentist on 6/25/24 to have dental impressions (mold of teeth taken by the dentist) for new bottom dentures.</p> <p>During an interview on 9/5/24 at 10:34 a.m. with SSD, SSD stated there was no documentation of Resident 1's dental services referral earlier than 6/5/24.</p> <p>During a review of the facility's P&P titled, Dental Services, dated December 2016, the P&P indicated, If dentures are damaged or lost, residents will be referred for dental services within 3 days. If the referral is not made within 3 days, documentation will be provided regarding what is being done to ensure that the resident is able to eat and drink adequately while awaiting the dental services; and the reason for the delay.</p>		