STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555247	A. Building B. Wing	04/17/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Rancho Mirage Health and Rehabilitation Center	39950 Vista Del Sol Rancho Mirage, CA 92270

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to ensure the personal belongings of one of three residents reviewed (Resident A) were protected when Resident A's hearing aid was not properly removed and stored. This failure resulted in damage to the device, which had the potential to cause impaired communication between Resident A, facility staff, and family. Findings: A review of Resident A's admission record indicated the resident was admitted to the facility on [DATE], with diagnosis of metabolic encephalopathy (brain dysfunction) and hearing loss. A review of Resident A's History and Physical dated February 19, 2026, indicated the resident did not have the capacity to make decisions. A review of Resident A's care plan dated February 19, 2026, indicated .The resident has an ADL (Activities of Daily Living) Self Care .wears bilateral hearing aids, one hearing aid missing .apply hearing aid Q am (every morning), collect hearing aids, open battery, and store Q HS (every bedtime) .A review of Resident A's Minimum Data Set (an assessment tool) dated February 22, 2026, indicated Resident A was highly impaired in hearing and utilized hearing aids. On March 9, 2026, at 5:30 p.m., during an interview with Resident A's Family Member (FM), the FM stated another family member visited the resident and noticed the resident's hearing aid was missing. The FM stated a staff member was notified, and the hearing aid was later found in the laundry, damaged. On March 12, 2026, at 11:15 p.m., during a concurrent observation and interview in Resident A's room with the FM present, the resident was lying in bed wearing only the right hearing aid. A Certified Nursing Assistant (CNA) asked Resident A if she was ready for lunch, the resident did not respond. When the FM repeated the question at a louder volume, the resident responded. The FM stated Resident A could hear with one hearing aid but not as well as when both hearing aids were in place. On March 12, 2026, at 12:30 p.m., during an interview with Laundry Supervisor (LS), the LS stated personal belongings should be checked in resident's clothing prior to laundering and any items found should be returned to the nursing station. The LS stated for Resident A's hearing aid, the laundry aid should have checked the clothing, and it was missed. On March 26, 2026, at 1:15 p.m., during an interview with Licensed Vocational Nurse (LVN) 2, LVN 2 stated the resident's daughter reported the hearing aid missing. LVN 2 stated that after searching the room, staff located the hearing aid in the laundry area, where it was found damaged. LVN 2 further stated the daughter had previously instructed staff to remove the hearing aid prior to the resident's shower. On March 27, 2026, at 9:02 a.m., during an interview with the Director of Nursing (DON), the DON stated the CNA who placed clothes in the hamper should have checked to make sure no personal belongings were in the resident's clothing. The DON further stated laundry staff should have checked to make sure that the clothing placed in the washer did not contain any personal items such as phone, glasses, or hearing aids. On March 27, 2026, at 12:10 p.m., during an interview with CNA 2, CNA 2 stated hearing aids should be removed prior to showers and stored in a designated case or secured location to prevent loss or damage. A review of the facility undated policy and procedures titled Hearing Aid, Care of, indicated .The purpose of this procedure is to maintain the resident's hearing at the highest attainable level.Do not clean or immerse any part of the hearing aid in water.Do not expose a hearing aid to heat, moisture or aerosol vapor.The licensed nurses are responsible for removal and storage of hearing aid.

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