

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555435	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/22/2024
NAME OF PROVIDER OR SUPPLIER Reche Canyon Regional Rehab Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1350 Reche Canyon Rd Colton, CA 92324	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47110</p> <p>Based on observation, interview, and record review, the facility failed to ensure a safe, comfortable, and homelike environment, when the shower room used by two of three sample residents (Resident 1 and 2) had uneven flooring, fractured tiles, and permanent residue on the wall.</p> <p>This failure had the potential to affect the health and wellness of Resident 1 and 2.</p> <p>Findings:</p> <p>During a telephone interview on October 21, 2024, at 8:45 AM, with Resident 1, Resident 1 stated shower room was dirty there was gloves on the floor, shower stall wasn ' t working there was no hot water at that time, the floor has mold that need to be scrubbed more.</p> <p>During a review of Resident 1 ' s clinical records, the Admission Record (contains demographic and medical information), indicated Resident 1 was admitted on [DATE], with diagnoses which included Osteomyelitis (bone infection), type 2 diabetes (Type 2 DM - a chronic disease that occurs when the body doesn ' t produce enough insulin or doesn ' t used insulin properly resulting in high blood sugar).</p> <p>During an interview on October 21, 2024, at 11:08 AM, with Resident 2, Resident 2 stated the shower room floor is dirty, side walls dirty, ceiling dirty, often sees dirty gloves on the floor. The water is cold but sometimes can be warm too.</p> <p>During a review of Resident 2 ' s clinical records, the Admission Record (contains demographic and medical information), indicated Resident 1 was admitted on [DATE], with diagnoses which included Chronic respiratory failure (long-term condition that makes it difficult to breathe on your own. It occurs when the longs can ' t get enough oxygen into the blood), tracheostomy (an opening in the neck and into the windpipe (trachea) to help with breathing), epilepsy (seizure disorder).</p> <p>During a concurrent record review and interview on October 21, 2024, at 10:14 AM, with the Director of maintenance (DM 1), the DM 1 reviewed Maintenance Assessment Log, which indicated that the hot water was not checked on some days.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a concurrent observation and interview on October 21, 2024, at 10:20 AM, with the Director of Housekeeping (DHK 1), the DHK 1 stated the bathroom floor is uneven and old, with cracks. She claimed that it makes no difference even if they use the black floor stripping pad (most aggressive scrubbing and black stripping pad. Used for stripping floors or heavy duty scrubbing on very dirty floors). She further explains that the wall has permanent residue that cannot be removed with chemicals or scrubbing.</p> <p>During an interview on October 21, 2024, at 10:42 AM with the Assistant Director of Nursing (ADON 1), the ADON 1 stated that the resident did not wear shoes or a sleeper when they were brought to the shower room.</p> <p>During an interview on October 21, 2024, at 12:50 PM with the Director of Nursing (DON 1), the DON 1 stated, yes, the shower room don ' t look clean.</p> <p>During a review of the facility policy and procedure (P&P) titled Maintenance Service dated December 2009, indicated, .a. Maintaining the building in compliance with current federal, state, and local laws, regulations, and guidelines. b. Maintaining the building in good repair and free from hazards .</p>		