

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555438	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/18/2025
NAME OF PROVIDER OR SUPPLIER Kei-Ai Los Angeles Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2221 Lincoln Park Ave Los Angeles, CA 90031	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0658 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to obtain a physician's order before applying topical (a medication applied to the skin) ointment in accordance with professional standards of practice for one of five sampled residents (Resident 1). For Resident 1, the facility failed to obtain a physician order before applying zinc oxide (a protective skin cream that works by creating a physical barrier on top of the skin) topical ointment to Resident 1's Moisture Associated Skin Damage (MASD, moisture associated skin damage caused from prolonged exposure to moisture) in the buttock skin folds on 11/18/25 at 9:10 a.m. This deficient practice had potential to place Resident 1 at risk for receiving unnecessary medication and experiencing adverse effects. During a review of the admission Record indicated the facility originally admitted Resident 1 on 9/25/2001, and readmitted on [DATE], with diagnoses including dysphagia (difficulty swallowing), cerebral infarction (a stroke caused by a blocked blood vessel in the brain) and dementia (a progressive state of decline in mental abilities). During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool) dated 10/24/2025, the MDS indicated Resident 1 had severe cognitive impairment (significant trouble with thinking, memory, concentration, and decision-making) and was dependent on activities of daily living (ADLs, basic routine tasks). The MDS indicated Resident 1 was at high risk of developing pressure ulcers (localized damage to the skin and/or underlying tissue usually over a bony prominence). During a concurrent observation in Resident 1's room and interview on 11/18/2025 at 9 a.m. with Certified Nurse Assistant (CNA 1) and Restorative Nurse Assistant (RNA 1, advanced CNA with specialized training in rehabilitation and therapy techniques) during adult brief change, Resident 1 was observed with bloody drainage, skin redness, and small skin tears (traumatic wounds caused by friction when the upper layer of the skin becomes torn from the underlying layers) in the buttock skin folds. CNA 1 and RNA 1 confirmed that Resident 1 had bloody discharge from the visible skin tear and notified Licensed Vocational Nurse (LVN 1, Treatment Nurse). During a concurrent observation in Resident 1's room and interview on 11/18/2025 at 9:10 a.m. LVN 1 assessed Resident's 1 skin and stated Resident 1 has MASD with bloody discharge in the buttocks skin fold. LVN 1 was observed cleansing the resident's buttock skin folds with Normal Saline Solution (NSS - a sterile solution of salt and water used to clean wounds) and applied zinc oxide ointment. LVN 1 stated Resident 1's MASD in the buttock skin folds was new. LVN 1 stated when a new skin issue was identified, it was the facility's common practice to follow the skin treatment protocol by cleansing the area with NSS and then apply zinc oxide ointment before reporting the skin condition to the physician. During an interview on 11/18/2025 at 12:15 p.m. the Director of Staff Development (DSD) stated the application of zinc oxide ointment required a physician's order. During concurrent interview and record review on 11/18/2025 at 12:50 p.m., the facility's Policy and Procedure (P&P) titled Skin Breakdown - Clinical Protocol was reviewed with the director of nursing (DON). The DON stated the facility's P&P did not indicate zinc oxide ointment could be applied without a physician's order. The DON stated the appropriate process for managing a skin integrity breakdown was to report the issue to the physician, obtain any necessary orders for topical treatments and then apply the ordered treatment. During a review of the facility's P&P titled Medication Administration reviewed on 3/27/2025 indicated the purpose of the Policy is . to be able to safely administer (medication) in a timely manner, and as prescribed, in accordance with nursing scope and practices. The same Policy indicated .medications shall be administered in accordance with the orders. During a review of facility's P&P titled Skin Breakdown - Clinical Protocol, updated 4/10/2025, indicated, The physician will order pertinent wound treatments, including pressure reduction surfaces, wound cleansing and debridement approaches, dressings (occlusive, absorptive, etc.), and application of topical agents. During a review of the facility's P&P titled Medication Orders reviewed on 4/10/2025 indicated .medications are administered only upon clear, complete and signed order of a person lawfully authorized to prescribe medications.</p>		