

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555539	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/07/2024
NAME OF PROVIDER OR SUPPLIER  Coalinga Regional Medical Ctr Dp/Snf		STREET ADDRESS, CITY, STATE, ZIP CODE  1191 Phelps Ave. Coalinga, CA 93210	

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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 48713</b></p> <p>Based on observation, interview and record review the facility failed to maintain a comfortable environment for one of 35 residents (Resident 12) when the room temperature, measured by the California Department of Public Health (CDPH) thermometer, in Resident 12 ' s room was 84 degrees Fahrenheit.</p> <p>This failure had the potential to result in dehydration (body does not have enough fluids) and heat exhaustion (body overheats and unable to cool itself) for Resident 12.</p> <p>Findings:</p> <p>During a concurrent observation and interview on 6/7/24 at 11:59 p.m. with the unit clerk (UC), the temperature in Resident 12 ' s room was observed. The temperature with the CDPH handheld thermometer read 84 degrees Fahrenheit. The unit clerk was observed checking the temperature of Resident 12 ' s room with the facility ' s handheld thermometer, the temperature was observed at 81 degrees Fahrenheit. The UC stated Resident 12 ' s room felt hot and hot air was being transferred into the room through the air conditioner vent. The UC stated the temperature range should have been 71-81 degrees.</p> <p>During a concurrent observation and interview on 6/7/24 at 12:00 p.m. with Resident 12, Resident 12 ' s room appeared humid and hot, Resident 12 was observed lying in bed covered in a bed sheet and wearing a gown. A floor fan was observed at the corner of the room turned off. Resident 12 stated her room felt hot but did not want the floor fan turned on. Resident 12 stated she did not want an ice pack, floor fan, popsicle or to remove her bed sheet. Resident 12 stated she would have preferred for the facility to fix the AC unit rather than change her comfortability.</p> <p>During a review of Resident 12's Admission Record (a summary of information regarding a patient which includes patient identification, past medical history, insurance status, care providers, family contact information and other pertinent information), the AR indicated Resident 12 was admitted to the facility on [DATE] with diagnosis for chronic pain syndrome, rheumatoid arthritis (inflammation of the joints), lupus (illness that attacks the immune system), anxiety (feeling of worry, unease and nervous) and fibromyalgia (disorder that causes pain in the muscles).</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 review of Resident 12's Minimum Data Set [MDS a resident assessment tool used to identify cognitive (mental processes) and physical functional level assessment] dated 5/2/24, the MDS indicated, Resident 12's Brief Interview for Mental Status (BIMS screening tool used to assess resident cognitive level) score was 15 out of 15 (0 - 7 indicated severe cognitive impairment [memory loss, poor decision making skills] 8 12 moderate cognitive impairment, (13 -15) cognitively intact) which indicated Resident 1 was cognitively intact.</p> <p>During an interview on 6/7/24 at 1:53 p.m. with the administrator (ADM), the ADM stated Resident 12 ' s room was above the temperature range at 84 degrees due to the air conditioner (AC) not circulating the air properly. The ADM stated the temperature range should have been 71-81 degrees. The ADM stated the technician was onsite to inspect the AC unit and fix the issue.</p> <p>During an interview on 6/7/24 at 2:05 p.m. with CNA 1, CNA 1 stated the facility felt hot the day prior when the temperature outside was high. CNA 1 stated there were complaints from residents about the facility temperature when the temperature would rise.</p> <p>During an interview on 6/7/24 at 2:31 p.m. with LVN 2, LVN 2 stated Resident 12 ' s room felt hot and humid.</p> <p>During an interview on 6/7/24 at 2:43 p.m. with the director of nurses (DON), the DON stated the facility temperature felt hot the day prior due to rising temperatures outside. The DON stated there was a technician onsite to address the issue with the AC not circulating the air in Resident 12 ' s room. The DON stated the temperature in Resident 12 ' s room at 84 degrees should have been 71-81 degrees for the resident to be in a comfortable environment.</p> <p>During a review of the facility ' s policy and procedure (P&amp;P) titled, Emergency Procedure-Utility Outage, dated 1/2024, the P&amp;P indicated, . Residents will remain safe and comfortable during a temporary loss of utility . utilize the following procedures if there is a loss of cooling functions (the facility temperature reaches 85 degrees Fahrenheit and remains so for four hours) . Monitor environmental thermometers .</p>