

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555619	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2025
NAME OF PROVIDER OR SUPPLIER Arroyo Grande Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1212 Farroll Avenue Arroyo Grande, CA 93420	

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 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to appropriately label and store drugs when three cartons of Med Pass 2.0 fortified nutritional shake were found to be expired in the medication room of nursing station two. This failure had the potential to result in residents possibly receiving expired and ineffective medication. During a concurrent observation and interview on [DATE] at 10:12 A.M. with licensed nurse (LN 3), while checking medications in Station 2 medication room, found three cartons of Med Pass 2.0 fortified nutritional shake, (drink to add additional dietary calories and protein Fortified with vitamins and minerals), expired. Two expired [DATE] and one expired [DATE]. LN 3 confirmed they are expired and stated, Those need to go. It's all med nurses responsibility to check them. During a review of the facility's policy and procedure titled Medication Storage dated [DATE], indicated, . N. Outdated .medications .are immediately removed from stock, disposed of according to procedures for medication disposal .</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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>Based on observation, interview and record review, the facility failed to follow the nutritional needs of a residents in accordance with recommended guidelines diet prescription for a renal diet for one of one resident (Resident 72) when Certified Nurse Assistant (CNA) 4 added salt to the resident's meal. This failure has the potential of not meeting the nutritional goal of the resident as prescribed diet. During an observation on 7/22/25 at 7:48 am at the dining room, Resident 72 was observed for her meal intake. Certified Nurse Assistant (CNA) 4 was overheard offering Resident 72 if she wanted to have salt and pepper on her meal with the resident responding with a nod. CNA 4 opened the salt packet and sprinkled salt into resident 72's meal. During a concurrent interview and record review on 7/22/25 at 7:48 am with CNA 4, the meal ticket of Resident 72 was reviewed. The meal ticket indicated in part, Minced Meat, Renal, Nectar Thick Large Minces /LS. CNA 4 stated that she reviewed the meal ticket and is aware that it is a renal diet and states that the LS means low salt that is why she added salt and pepper to the meal. During an interview on 7/22/25 at 7:55 am with the Registered Dietician (RD) and Dietary Manager (DM), both stated that LS stands for low sugar and renal diets are not supposed to have no salt added to their meals. During a review of Policies and Procedures (P&P) titled Diets Available on Menu, the Diets Available on Menu indicated in part, 1. Diets will be offered as ordered by physician or his/her designee . The therapeutic diet orders that will be offered are g. Low Sugar (LS), 2. In an effort to individualize therapeutic orders, secondary diet orders may be offered and can be combined with the main diet order to achieve desired results: a. No salt packets/No salt on table.</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>Based on observation, interview, and record review, the facility failed to ensure food safety standards were followed when an expired milk, brought in by family, was found in the snack refrigerator in nursing station 2. This failure had the potential to cause food- borne illness to a vulnerable resident. During a concurrent observation and interview on 7/22/2025 at 10:35 A.M., with licensed nurse (LN 2), while checking the snack refrigerator in Station 2, found an Alta Dena reduced fat milk (brought in by family) was expired on 6/17/2025. LN 2 confirmed the milk was expired and stated, We usually check items brought in by family. We should check it daily. During a review of the facility's policy and procedure titled, Resource: Food Safety for Your Loved Ones, dated 2022, indicated in part ., Food or beverages should be labeled and dated to monitor for food safety: . Foods and beverages that have passed the manufacturer's expiration date will be discarded.</p>		