

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555688	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/20/2024
NAME OF PROVIDER OR SUPPLIER Anaheim Point Healthcare & Wellness Centre, LP		STREET ADDRESS, CITY, STATE, ZIP CODE 3415 W Ball Road Anaheim, CA 92804	

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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47474</p> <p>Based on observation, interview, and facility document review, the facility failed to ensure the routine changes of indwelling urinary catheter order were clarified with the physician for one of two sampled residents (Resident 2). This failure had the potential to put Resident 2 at risk for UTI.</p> <p>Findings:</p> <p>Review of the CDC's resource for Infection Control - Catheter-Associated Urinary Tract Infections (CAUTI) dated 2009 showed the Proper Techniques for Urinary Catheter Maintenance include changing indwelling urinary catheters or drainage bags at routine, fixed intervals is not recommended. Rather, it is suggested to change catheters and drainage bags based on clinical indications such as infection, obstruction, or when the closed system is compromised.</p> <p>Review of the facility's P&P titled Catheter - Care Of revised on 6/2021 showed the indwelling urinary catheters will not be changed at the arbitrary fixed intervals. The entire system will be changed when it functions poorly, is obstructed, or is the source of odors.</p> <p>Medical record review for Resident 2 was initiated on 6/20/24. Resident 2 was admitted to the facility on [DATE], and readmitted on [DATE].</p> <p>Review of Resident 2's Admission MDS dated [DATE], showed Resident 2's cognitive skills were moderately impaired.</p> <p>Review of Resident 2's Order Summary Report showed a physician's order dated 5/10/24, to insert the indwelling urinary catheter size FR #18 with balloon via gravity drainage for obstructive uropathy (a disorder due to obstructed urinary flow) secondary to BPH. The order summary report further showed to change the indwelling urinary catheter as per schedule (on Sundays) and as needed for leaking, occlusion, dislodgement, and excessive sedimentation.</p> <p>However, further review of the medical record showed no documented evidence of the clarification of the order to routinely changes the resident's indwelling urinary catheter as the facility's P&P showed not to change at the fixed intervals.</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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 6/20/24 at 1003 hours, a concurrent interview and medial record review with the IP was conducted. The IP verified Resident 2 had a routine order to change the indwelling urinary catheter weekly on Sundays. The IP acknowledged the weekly indwelling urinary catheter changes increased the risk for infection. Furthermore, the IP stated the routine indwelling urinary catheter changes were not recommended as per the CDC's guidelines.</p> <p>On 6/20/24 at 1030 hours, a concurrent interview and medical record review was conducted with the DON. The DON verified Resident 2 had an indwelling urinary catheter order for routine weekly changes were scheduled on Sundays. The DON stated theindwelling urinary catheters should be changed as needed to help reduce the risk for infection and would follow up with the physician.</p> <p>On 6/20/24 at 1600 hours, an interview with the Administrator and DON was conducted. The Administrator and DON verified the above findings.</p>