

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555726	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/29/2025
NAME OF PROVIDER OR SUPPLIER Mar Vista Country Villa Healthcare & Wellness		STREET ADDRESS, CITY, STATE, ZIP CODE 3966 Marcaseal Ave Los Angeles, CA 90066	

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 0580</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43261</p> <p>Cross Referenced F609, F610, F656</p> <p>Based on interview and record review, the facility staff failed to notify the physician when a resident had a change of condition (CIC) for one of eight sampled residents (Resident 1).</p> <p>This deficient practice had the potential to result in delayed provision of necessary care, treatment and services to Resident 1.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1 ' s Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:39 p.m., with Licensed Vocational Nurse (LVN) 1, Resident 1 ' s Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1 ' s PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) was supposed to report to the physician and document Resident 1 ' s COC via SBAR (situation, background, appearance and review/notify- structured tool for healthcare provider that provides communication between members. Also, being used as documentation for any changes of condition). LVN1 also stated that he (LVN1) was not sure why it was not completed.</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 0580</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a review of the facility ' s policy and procedures (P&P) titled, Change of Condition Notification, reviewed on 6/19/2024, P&P indicated, that Facility to ensure residents, family, legal representatives and physicians are informed of changes in the resident ' s condition in a timely manner . COC related to attending physician notification is defined as when the attending physician must be notified when any sudden and marked adverse change in the resident ' s condition in which is manifested by signs and symptoms different than usual denote a new problem, complication or permanent change in status and require a medical assessment, coordination and consultation with the attending physician and a change in the treatment plan.</p> <p>Cross Referenced F609, F610, F656</p> <p>Based on interview and record review, the facility staff failed to notify the physician when a resident had a change of condition (CIC) for one of eight sampled residents (Resident 1).</p> <p>This deficient practice had the potential to result in delayed provision of necessary care, treatment and services to Resident 1.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:39 p.m., with Licensed Vocational Nurse (LVN) 1, Resident 1's Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1's PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) was supposed to report to the physician and document Resident 1's COC via SBAR (situation, background, appearance and review/notify- structured tool for healthcare provider that provides communication between members. Also, being used as documentation for any changes of condition). LVN1 also stated that he (LVN1) was not sure why it was not completed.</p> <p>During a review of the facility's policy and procedures (P&P) titled, Change of Condition Notification, reviewed on 6/19/2024, P&P indicated, that Facility to ensure residents, family, legal representatives and physicians are informed of changes in the resident's condition in a timely manner . COC related to attending physician notification is defined as when the attending physician must be notified when any sudden and marked adverse change in the resident's condition in which is manifested by signs and symptoms different than usual denote a new problem, complication or permanent change in status and require a medical assessment, coordination and consultation with the attending physician and a change in the treatment plan.</p>

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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43261</p> <p>Cross Referenced F580, F610, F656</p> <p>Based on interview and record review, the facility failed to implement policies and procedures (P&P) to ensure reporting of a reasonable suspicion of an abuse in accordance with state and federal law for one of eight sampled resident (Resident 1).</p> <p>This resulted in a delay of an onsite inspection by the State Agency (SA) to ensure the safety of the residents and had the potential to result in unidentified abuse in the facility as well as failure to protect residents from any possible abuse.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1 ' s Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:24 p.m., with Licensed Vocational Nurse (LVN) 1, Resident 1 ' s Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1 ' s PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) did not remember reporting the issue to the Director of Nursing (DON), neither to the Facility Administrator (FA). LVN1 stated that he (LVN1) was supposed to report any possible abuse to the DON and FA.</p> <p>During an interview on 1/29/2025 at 1:26 p.m., with the Registered Nursing Supervisor (RNS) 1, RNS1 stated that she (RNS1) was not aware of Resident 1 ' s issue of possible abuse. RNS1 stated that if LVN1 reported it to her (RNS1), RNS1 could have done an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and the Department of Public of Health (DPH).</p> <p>During an interview on 1/29/2025 at 1:28 p.m., with the DON, DON stated that she (DON) was not informed of Resident 1 ' s issue of possible abuse. DON stated that they need to do an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and DPH. DON also stated that even if a resident has episodes of making up stories, they (facility staff) still are mandated reporter and a possible abuse investigation was necessary.</p> <p>(continued on next page)</p>		

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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 1/29/2025 at 1:31 p.m., with the Social Service Director (SSD), SSD stated that she (SSD) was not informed of Resident 1 ' s issue of possible abuse. SSD stated that the facility needs to do a proper investigation regardless of resident ' s condition and facility staff are mandated to report for resident ' s safety.</p> <p>During a review of the facility ' s policy and procedures (P&P) titled, Reporting Abuse, reviewed on 6/19/2024, P&P indicated that facility to ensure compliance with federal, and state laws and regulations regarding reporting of incidents and suspected incidents of abuse, neglect and mistreatment of residents. P&P also stated that facility staff are mandatory reporters.</p> <p>During a review of the facility ' s P&P, titled, Abuse and Neglect, reviewed on 6/19/2024, P&P indicated that the facility will report all allegations of abuse and criminal activity, as required by law and regulations, to the appropriate agencies. P&P also indicated that, allegations of abuse .are to be reported to the administrator or designated representative immediately.</p> <p>Cross Referenced F580, F610, F656</p> <p>Based on interview and record review, the facility failed to implement policies and procedures (P&P) to ensure reporting of a reasonable suspicion of an abuse in accordance with state and federal law for one of eight sampled resident (Resident 1).</p> <p>This resulted in a delay of an onsite inspection by the State Agency (SA) to ensure the safety of the residents and had the potential to result in unidentified abuse in the facility as well as failure to protect residents from any possible abuse.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:24 p.m., with Licensed Vocational Nurse (LVN) 1, Resident 1's Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1's PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) did not remember reporting the issue to the Director of Nursing (DON), neither to the Facility Administrator (FA). LVN1 stated that he (LVN1) was supposed to report any possible abuse to the DON and FA.</p> <p>(continued on next page)</p>		

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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 1/29/2025 at 1:26 p.m., with the Registered Nursing Supervisor (RNS) 1, RNS1 stated that she (RNS1) was not aware of Resident 1's issue of possible abuse. RNS1 stated that if LVN1 reported it to her (RNS1), RNS1 could have done an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and the Department of Public of Health (DPH).</p> <p>During an interview on 1/29/2025 at 1:28 p.m., with the DON, DON stated that she (DON) was not informed of Resident 1's issue of possible abuse. DON stated that they need to do an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and DPH. DON also stated that even if a resident has episodes of making up stories, they (facility staff) still are mandated reporter and a possible abuse investigation was necessary.</p> <p>During an interview on 1/29/2025 at 1:31 p.m., with the Social Service Director (SSD), SSD stated that she (SSD) was not informed of Resident 1's issue of possible abuse. SSD stated that the facility needs to do a proper investigation regardless of resident's condition and facility staff are mandated to report for resident's safety.</p> <p>During a review of the facility's policy and procedures (P&P) titled, Reporting Abuse, reviewed on 6/19/2024, P&P indicated that facility to ensure compliance with federal, and state laws and regulations regarding reporting of incidents and suspected incidents of abuse, neglect and mistreatment of residents. P&P also stated that facility staff are mandatory reporters.</p> <p>During a review of the facility's P&P, titled, Abuse and Neglect, reviewed on 6/19/2024, P&P indicated that the facility will report all allegations of abuse and criminal activity, as required by law and regulations, to the appropriate agencies. P&P also indicated that, allegations of abuse .are to be reported to the administrator or designated representative immediately.</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43261</p> <p>Cross Referenced F580, F609, F656</p> <p>Based on interview and record review, the facility failed to implement its policies and procedures by failing to ensure an investigation was completed for any reasonable suspicion of an abuse in accordance with state and federal law for one of eight sampled resident (Resident 1).</p> <p>This resulted in a delay of an onsite inspection by the State Agency (SA) to ensure the safety of the residents and had the potential to result in unidentified abuse in the facility as well as failure to protect residents from any possible abuse.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1 ' s Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:24 p.m., with Licensed Vocational Nurse (LVN) 1, Resident 1 ' s Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1 ' s PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) did not remember reporting the issue to the Director of Nursing (DON), neither to the Facility Administrator (FA). LVN1 stated that he (LVN1) was supposed to report any possible abuse to the DON and FA and start an investigation.</p> <p>During an interview on 1/29/2025 at 1:26 p.m., with the Registered Nursing Supervisor (RNS)1, RNS1 stated that she (RNS1) was not aware of Resident 1 ' s issue of possible abuse. RNS1 stated that if LVN1 reported it to her (RNS1), RNS1 could have done an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and the Department of Public of Health (DPH).</p> <p>During an interview on 1/29/2025 at 1:28 p.m., with the DON, DON stated that she (DON) was not informed of Resident 1 ' s issue of possible abuse. DON stated that they need to do an investigation and notify the DON and/or FA; and report it to the local police, ombudsman and DPH. DON also stated that even if a resident has episodes of making up stories, they (facility staff) still are mandated reporter and a possible abuse investigation was necessary.</p> <p>(continued on next page)</p>		

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43261</p> <p>Cross Referenced F580, F609, F610</p> <p>Based on interview and record review, the facility failed to develop and implement a comprehensive care plan that meet the care/services based on the resident ' s individual assessed needs for one of eight sampled residents (Resident 1) by failing to ensure a care plan was completed when Resident 1 stated to Licensed Vocational Nurse (LVN) 1, that Resident 1 was raped and touched by a Certified Nursing Assistant (CNA).</p> <p>This deficient practice had the potential to result negative impact on Resident 1 ' s health and safety, as well as the quality of care and services received.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a review of Resident 1's Care Plan (CP), as of 1/29/2025, CP indicated no documentation when Resident 1 stated to Licensed Vocational Nurse (LVN) 1, that Resident 1 was raped and touched by a CNA.</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:39 p.m., with LVN1, Resident 1 ' s Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1 ' s PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) was supposed to ensure an individualized care plan was completed for Resident 1. LVN1 also stated that he (LVN1) was not sure why it was not completed.</p> <p>During a review of the facility ' s policy and procedures (P&P) titled, Comprehensive Person-Centered Care Planning, reviewed on 6/19/2024, P&P indicated, that the comprehensive care plan will also be reviewed and revised at the following times:</p> <p>i. Onset of new problems;</p> <p>ii. Change of condition;</p> <p>(continued on next page)</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555726	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/29/2025
NAME OF PROVIDER OR SUPPLIER Mar Vista Country Villa Healthcare & Wellness		STREET ADDRESS, CITY, STATE, ZIP CODE 3966 Marcasel Ave Los Angeles, CA 90066	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>iii. In preparation for discharge;</p> <p>iv. To address changes in behavior and care; and</p> <p>v. Other times as appropriate or necessary.</p> <p>During a review of the facility ' s P&P titled, Change of Condition Notification, reviewed on 6/19/2024, P&P indicated, under documentation that, A licensed nurse will document and update the care to reflect the resident ' s current status.</p> <p>Cross Referenced F580, F609, F610</p> <p>Based on interview and record review, the facility failed to develop and implement a comprehensive care plan that meet the care/services based on the resident's individual assessed needs for one of eight sampled residents (Resident 1) by failing to ensure a care plan was completed when Resident 1 stated to Licensed Vocational Nurse (LVN) 1, that Resident 1 was raped and touched by a Certified Nursing Assistant (CNA).</p> <p>This deficient practice had the potential to result negative impact on Resident 1's health and safety, as well as the quality of care and services received.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record (AR), AR indicated Resident 1 was originally admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses including hypokalemia (low potassium [important mineral that the body needs, to work properly] level in the blood, hypertension (HTN - elevated blood pressure), and chronic obstructive pulmonary disease (COPD-group of lung diseases that block airflow and make it difficult to breathe).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool), dated 11/7/2024, MDS indicated Resident 1's cognitive skills for daily decision-making were moderately impaired and required moderate to maximal assistance from staff for activities of daily livings (ADLs- toileting hygiene, shower/bathing self, upper and lower body dressing, repositioning from sit to lying and sit to stand).</p> <p>During a review of Resident 1's Care Plan (CP), as of 1/29/2025, CP indicated no documentation when Resident 1 stated to Licensed Vocational Nurse (LVN) 1, that Resident 1 was raped and touched by a CNA.</p> <p>During a concurrent interview and record review on 1/29/2025 at 1:39 p.m., with LVN1, Resident 1's Progress Notes (PN), dated 10/2/2024 was reviewed. Resident 1's PN indicated LVN1 documented that, Resident 1 confabulated stories that the CNA (Certified Nursing Assistant) raped her and touched her (Resident 1). LVN1 validated the documentation and stated that he (LVN1) was supposed to ensure an individualized care plan was completed for Resident 1. LVN1 also stated that he (LVN1) was not sure why it was not completed.</p> <p>(continued on next page)</p>

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<p>F 0656</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a review of the facility's policy and procedures (P&P) titled, Comprehensive Person-Centered Care Planning, reviewed on 6/19/2024, P&P indicated, that the comprehensive care plan will also be reviewed and revised at the following times:</p> <ul style="list-style-type: none"> i. Onset of new problems; ii. Change of condition; iii. In preparation for discharge; iv. To address changes in behavior and care; and v. Other times as appropriate or necessary. <p>During a review of the facility's P&P titled, Change of Condition Notification, reviewed on 6/19/2024, P&P indicated, under documentation that, A licensed nurse will document and update the care to reflect the resident's current status.</p>