

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555728	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/07/2024
NAME OF PROVIDER OR SUPPLIER San Francisco Towers		STREET ADDRESS, CITY, STATE, ZIP CODE 1661 Pine Street San Francisco, CA 94109	

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 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38066</p> <p>Based on interview and record review, the facility failed to ensure one of three sampled residents (Resident 69) was free from unnecessary psychotropic medication (drug that affect brain activities associated with mental processes and behavior) when there was no specific target behavior monitoring for the use of Lorazepam (medication used to treat anxiety).</p> <p>This failure had the potential for Resident 69 to receive unnecessary psychotropic medication, be exposed to adverse health consequences from the medication, which could negatively impact the resident's mental, physical, and psychosocial well-being.</p> <p>Findings:</p> <p>Resident 69 was admitted on [DATE] with diagnoses including mesothelioma of pleura (a rare cancer that grows in the membrane that lines the walls of your chest and lungs), major depressive disorder, and anxiety disorder (a mental health disorder characterized by feelings of worry, or fear that are strong enough to interfere with one's daily activities).</p> <p>During a review of Resident 69's clinical record, the Order Summary Report (OSR), active orders as of 6/6/24, indicated, .Lorazepam Oral Tablet 0.5 milligram (mg) Give 0.5 mg by mouth every 12 hours as needed for anxiety manifested by (m/b) anxious behavior with shortness of breath (SOB) .Monitor the following behavior for use of Ativan (Lorazepam) 1. Anxious behavior with SOB every shift (qshift) .Start Date 5/31/24 .</p> <p>During a review of Resident 69's clinical record, the Medication Administration Record, dated 6/1/24 to 6/30/24 indicated, .Lorazepam Oral Tablet 0.5 mg . was administered twice on 6/1/24 and once on 6/4/24.</p> <p>During a review of Resident 69's clinical record, the MAR. dated 6/1/24 to 6/30/24 indicated, .Monitor the following behavior for use of Ativan qshift 1. Anxious behavior with SOB ., Resident 69 exhibited anxious behavior with SOB on the evening shift of 6/1/24 and 6/2/24.</p> <p>During an interview on 6/5/24 at 1:56 PM with Certified Nursing Assistant (CNA) 1, CNA1 stated that Resident 69's anxious behavior was resident always wants to go home and complains of pain.</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 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview and concurrent record review on 6/6/24 at 10:30 AM with Registered Nurse (RN) 1, Resident 69's OSR and MAR were reviewed. RN1 acknowledged the clinical records did not indicate the specific target behavior symptom to be monitored for the use of Lorazepam, and stated, It's broad. It should be more specific.</p> <p>Facility policy titled Psychotherapeutic Medication Use revised on March 2024, did not include monitoring for specific target behaviors for the use of psychotropic drugs.</p>

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<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>48700</p> <p>Based on observation, interview, and record review, the facility failed to ensure medications were properly stored and appropriately labeled when one unopened and undated Basaglar KwikPen Insulin (hormone medication that helps control blood sugar levels in people with diabetes) for Resident 3 was stored in the medication cart.</p> <p>This failure had the potential for Resident 3 to receive medication with unsafe and reduced potency from improper storage.</p> <p>Findings:</p> <p>During an observation on 6/5/24 at 10:20 AM, one unopened and sealed Basaglar KwikPen Solution Pen Injector 100 Unit/ml Insulin was stored in the medication cart.</p> <p>Review of Resident 3's Medication Administration Record (MAR) dated 6/2/24 indicated, Basaglar Kwikpen Solution per injector 100 Unit/ml (Insulin Glargine) was last administered on 6/2/24 at 7:00PM.</p> <p>During an interview on 6/5/24 at 11:42 AM, with Licensed Vocational Nurse (LVN) 1, LVN 1 stated, Resident 3 always refused to take insulin, that's why the insulin is not yet opened, it is still full. All I know that once taken out from the refrigerator and it's in the cart it should not be taken back to the refrigerator.</p> <p>During an interview on 6/5/24 at 12:20 PM, with the Director of Nursing (DON), the DON stated, The Basaglar KwikPen subcutaneous Solution is not yet opened, as you can see, it is sealed and there was no open date. I checked the MAR, it was last administered on 6/2/24 at 7:00 PM. The DON further stated, Where can we find the statement that insulin should be kept stored in the refrigerator?</p> <p>Review of facility's undated policy titled Storage of Medication indicated, .Medications and Biologicals are stored properly, following manufacturer's provider pharmacy recommendations to maintain their integrity and to support safe effective drug administration .Procedure #12: Insulin products should be stored in the refrigerator until opened. Note the date on the label for insulin vials and pens when first used</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40478</p> <p>Based on observation, interview and record review, the facility failed to ensure food safety requirements in accordance with professional standards for food service when:</p> <ol style="list-style-type: none"> 1. Cleaned baking pans and metal trays were stacked moist and wet. 2. One blender had broken and jagged rim. 3. Opened and undated apricot jelly, mustard, and muffin butter were found in the refrigerator, on the shelf, and the walk-in refrigerator. 4. A kitchen staff was observed carrying clean plates in an unsanitary manner. 5. A kitchen staff did not perform hand washing between tasks. <p>The failure to store cooking and serving utensils and blender; store opened and undated foods; handling eating utensils in a sanitary manner; and practicing proper hand hygiene has the potential of putting residents at risk for foodborne illnesses leading to severe negative health outcomes and even death for 21 residents who consumed food by mouth during mealtimes.</p> <p>Findings:</p> <ol style="list-style-type: none"> 1. During a concurrent observation and interview on 6/4/24 at around 10 AM in the kitchen with the Director of Dining Services (DDS), the Corporate Chef (CC), and the Executive Sous Chef (ESC), observed stacks of baking pans and trays on the rack that are still wet and moist when touched. Some with drops of water on their folds. The DDS stated, yes, it is wet. Observed the CC picked up the stack of wet pans and trays and stated this needs to be washed again and gestured to a kitchen staff . 2. During a concurrent observation and interview with the DDS, CC and ESC on 6/5/24 at around 11 AM in the kitchen, observed a blender with broken and jagged edge on a shelf with other blenders. During an interview, the ESC stated, that is broken . observed the ESC took it from the shelf and walked away. Observed the DDS and CC were just quiet. <p>According to the 2022 Federal Food Code, after cleaning and sanitizing, equipment and utensils are to be air-dried before storing.</p> <p>According to the annex, wet nesting occurs when dishes or pots and pans are stacked, preventing them from drying, and creating conditions that are ripe for microorganisms to grow.</p> <p>(continued on next page)</p>

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>During a review of the facility's policy and procedure, section: Sanitation and infection prevention control. Subject: Storage of pots, dishes, flatware, utensils. Policy #F017. Date issued: 5/95. Date revised:1/23. Policies: Pots, dishes and flatware are stored in such a way as to prevent contamination by splash, dusts, pests, or other means. Procedures: Dish handlers, tray line area associates: *Air dry all food contact surfaces including pots, dishes, flatware, and utensils before storage.Do not stack or store when wet.</p> <p>3. During a concurrent observation and interview on 6/4/24 at around 10 AM in the kitchen with the Director of Dining Services (DDS), the Corporate Chef (CC), and the Executive Sous Chef (ESC), the following were found:</p> <p>a) An undated large square plastic container of yellow brownish jelly in the refrigerator. Observed the ESC pulled it out and looked on each side of the container and stated this is apricot jelly. There is no date on it. We will toss this out. Observed the ESC closing the lid of the container but the lid opens on the other side when closed on the opposite side.</p> <p>b) An undated half full large plastic original container of light brown sticky looking stuff with tiny black spots was on a shelf of the dry storage room. When asked, the ESC picked-it up and stated, this is mustard. There is no open date on it. Observed the ESC brought the container of mustard out of the storage room.</p> <p>c) An undated almost half full plastic container of tan looking doughy stuff was on one shelf of a walk-in refrigerator room. When asked, the ESC stated, this is muffin butter. There is no open date on it. I will take this out.</p> <p>During a review of the facility's policy and procedure section: Production, purchasing, storage. Subject: Food and supply storage. Policy # B003. Date issued: 5/95. Date Revised: 1/24 indicated. Policies: All food, non-food items and supplies used in food preparation shall be stored in such a manner as to prevent contamination to maintain the safety and wholesomeness of the food for human consumption. Procedures: 1. Most, but not all, products contain an expiration date. The words sell by, best-by, enjoy-by, or use-by should precede the date. The sell-by date is the last date that food can be sold or consumed, do not sell products Foods past the use-by date, sell-by, best-by, or enjoy-by date should be discarded. 2. Cover, label and date unused portions and open packages. Complete all sections on a [NAME] orange label or use the Prep & Print labeling system. Products are good through the close of business on the date noted on the label. 3. Refer to Food Storage Chart in this policy to determine the discard dates for food items. 7. Date and rotate items; first in first out (FIFO). Discard food past the use-by or expiration date. Dry storage: 4. Store foods in their original packages. Foods that must be opened must be stored in NSF (National Sanitation foundation - develops strict standards for public health and safety. NSF officials use the organization's safety standards to test and certify a wide range of food, water, and consumer products.) approved containers that have tight fitting lid.</p> <p>Refrigerated storage: See policy B004: Cold storage: 1. Temperature for appropriate temperatures for refrigerated and frozen foods areas. 5. Unused portions of canned fruits and vegetables must be transferred to clean, approved storage containers. Do not store in open cans. 6. Store bulk materials in NSF approved containers that have tight fitting lids. Label both the bin and the lid.</p> <p>(continued on next page)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>4. During a concurrent observation and interview on 6/5/24 at 10:12 AM in the kitchen, observed one staff carrying while hugging against his chest multiple clean plates from the washing area to the tray line area. Informed the CC. During an interview with the CC he asked, did you tell him. This surveyor said no because the staff was at a distance when observed. This surveyor and the CC approached the staff. The CC spoke to the staff. The staff was observed nodding his head and responding. The CC explained to this surveyor that the staff understood he was not supposed to carry clean plates and eating utensils hugging, touching his skin or clothes. During interview with the staff and the CC, the staff acknowledged his error and said yes.</p> <p>5. During a concurrent observation and interview with the Corporate Chef (CC) on 6/5/24 at 10:12 AM, in the kitchen, observed a staff (server) enter the kitchen pushing a service cart with a pitcher and utensils on the cart. He has gloves on his hand. Observed the server stopped in front of us, opened the lid of a garbage bin with his gloved hands behind us and throw something in the garbage bin. After closing the lid of the bin with the same gloves on his hand he came back and about to continue pushing the cart when he was stopped by the CC and was told to wash his hands and change his gloves. The staff (server) removed his gloves, threw them in the garbage bin and went to the sink to wash his hands. After washing his hands with a paper towel in his hands he stopped to talk to another kitchen staff in front of us. While talking to his co-worker, observed him wipe his face with the paper towel, and inserted part of the paper towel inside his nose. The CC was directed to see the server wipe his face and nose with the paper towel after washing his hands. The CC approached the server and instructed him to wash his hands again. The CC stated, we will give them an in-service on handwashing. During an interview with the server, he stated, ok, I will remember that.</p> <p>During a review of the facility's file section: Sanitation and infection prevention/control, Subject: Hand hygiene. Policy #F007. Date issued: 5/95. Date revised: 1/20. Policies: In the Food & Nutrition Services Department: All associates associated with the handling of food shall wash hands. Hands are washed with soap and water at the following times: #5. After taking break when returning to the kitchen, #6. After touching hair, skin, beard, or clothing.</p> <p>Review of Employee Health and Personal Hygiene Handbook indicates the 2017 FDA Food Code, U.S. Department of Health and Human Services, Public Health Service, Food and Drug Administration on page 4, indicates Proper handwashing reduces the spread of fecal-oral pathogens from the hands of a food employee to foods. Handwashing can also help reduce the transmission of other pathogens from environmental sources. Effective handwashing includes scrubbing, rinsing, and complete drying of hands and is essential for minimizing the likelihood of cross-contamination. The fingernails and surrounding areas are often the most contaminated parts of the hand and are also the most difficult part of the hand to get clean. Every stage of handwashing is equally important and has an effect in reducing contamination of the hands.</p>		