STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555738	A. Building B. Wing	12/06/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Windsor Terrace Health Care	7447 Sepulveda Blvd Van Nuys, CA 91405

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)
F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. 43636 Based on interview and record review, the facility failed to ensure accurate documentation of the administration of medications for one of three sampled residents (Resident 1), by failing to document the refusal of Resident 1's medications on the Medication Administration Record (MAR, a report detailing the medications administered to a resident by the licensed nurse in the facility). These deficient practices had the potential to result in medication errors and/or drug diversion (illegal distribution or abuse of prescription drug). Findings: During a review of Resident 1's Admission Record, the Admission Record indicated the facility admitted Resident 1 on 2/26/2021 with diagnoses that included quadriplegia (paralysis [complete or partial loss of muscle function] of all four limbs), hypertension (high blood pressure [the force of the blood pushing on the blood vessel walls is too high]), anxiety (intense, excessive, and persistent worry and fear about everyday situations), and muscle spasm (sudden, involuntary and painful contractions [tightening, shortening, or lengthening] of muscle). During a review of Resident 1's History and Physical (H&P- a formal assessment by a healthcare provider that involves a resident interview, physical exam, and documentation of findings) dated 10/1/2024, indicated Resident 1 has the capacity to understand and make decisions. During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool) dated 9/1/2024, the MDS indicated Resident 1's cognition (the mental action or process of acquiring knowledge and understanding through thought, experience, and the sense) was intact. The MDS indicated Resident 1 was dependent on staff for eating, oral hygiene, personal hygiene, upper body dressing toileting hygiene and showering and bathing. During a review of Resident 1's MAR dated 11/2024, the MAR indicated Resident 1 had scheduled medications that were due on 11/25/2024 and 11/26/2024 during the evening shift (3 p.m.-11 p.m.), which included: 1. Baclofen (a medication used to treatment muscle spasticity [abnormal muscle tightness dye to prolonged muscle contraction]) 10 milligrams (mg- unit of measurement). (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555738	A. Building B. Wing	12/06/2024

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	2. Diclofenac sodium external gel (a medication used to treat pain of the joints). 3. Docusate sodium (a medication used for stool softener) 250 mg. 4. Fluorometholone suspension (a medication used to try swelling, redness or itching of the eyes) 0.1% eye drops for both eyes. 5. Hiprex tablet (a medication to prevent urinary tract infections [an infection in any part of the urinary system]) one (1) gram (gm- unit of measurement). 6. Methocarbamol (a medication used for muscle relaxation) tablet 500 mg two (2) tablets. 7. Pepcid (a medication used to decrease stomach acid production) tablet 20 mg. Resident 1's MAR dated 11/25/2024 and 11/26/2024, indicated the evening shift, 3 p.m. to 11 p.m., was left blank with no indication if Resident 1 received the scheduled medication or if Resident 1 refused the medication. During an interview on 12/5/2024 at 2:00 p.m., with Resident 1, Resident 1 stated that he was not provided medication but unsure of the exact date. Resident 1 stated that there are times he will refuse his scheduled medications. During an interview on 12/6/2024 at 12:25 p.m., with Registered Nurse 1 (RN 1), RN 1 confirmed by stating she was the nurse for Resident 1 on 11/26/2024 for part of the evening shift from 3 p.m. to 7p.m. RN 1 stated that Resident 1 had refused his medications on 11/26/2024 during her shift from 3 p.m. to 7 p.m. RN 1 stated that she should have documented the refusal of Resident 1's medications on the MAR. During a concurrent interview and record review on 12/6/2024 at 1:15 p.m., with the Director of Nursing (DON), reviewed Resident 1's MAR dated 11/25/2024 and 11/26/2024. The DON confirmed by stating that Resident 1 has a history of refusing scheduled medications and when Resident 1 refuses medications, the correct process for the nursing staff is to document the refusal on the MAR. The DON stated that on 11/25/2024 and 11/26/2024, nursing staff should have documented Resident 1's refusal of medications for the 3 p.m. to 11 p.m. shift. During a review of the facility's policy and procedure titled, Administering Medications, with a revision date 1/10/2024, the policy indicated medications are administered in a safe and timely manner and as prescribed . If a drug is withheld, refused, or given at time other than the scheduled time, the individual administering the medication shall document accordingly .The individual administering the medication initials the resident's MAR on the appropriate line after giving each medication and before administering the next ones.