

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555738	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/06/2026
NAME OF PROVIDER OR SUPPLIER Terrace Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 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)
<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation, interview, and record review, the facility failed to implement the facility's infection control policy when one of three sampled staff (Certified Nursing Assistant 2 [CNA 2]) entered the room of a resident who was placed on droplet precautions (infection control measure used to prevent transmission of infectious agents spread through respiratory droplets which are generated by coughing, sneezing, or talking) and contact precautions (infection-control measure used to prevent the spread of germs transmitted through direct or indirect contact), without wearing the appropriate personal protective equipment (PPE - clothing and equipment that is worn or used to provide protection against hazardous substances and/or environments). The deficient practice had the potential to spread infection and cause cross contamination (the physical movement or transfer of harmful bacteria [germs] from one person, object, or place to another) among staff and other residents. Findings: During a review of Resident 4's admission Record, the admission Record indicated the facility admitted Resident 4 on 3/4/2026 with diagnoses that included influenza. During a review of Resident 4's History and Physical (H&P) dated 3/6/2026, the H&P indicated Resident 4 has the capacity to understand and make decisions. During a review of Resident 4's Order Summary Report, the Order Summary Report indicated an order dated 3/5/2026, for contact and droplet Isolation every shift due to influenza (a contagious respiratory virus that infects the nose, throat, and lungs). During a review of Resident 4's Care Plan Report (CP-a written document where you can summarize the resident's conditions, specific care needs, and current treatments) initiated on 3/6/2026, the CP indicated Resident 4 has influenza A (a contagious viral infection that can have life threatening complications if left untreated). The CP indicated an intervention to provide instructions/education to the resident's family/visitor and staff regarding contact precautions and proper use of PPE needed when in direct contact with the resident and materials needed and used by the resident. During an observation on 3/6/2026 at 11:20 a.m., outside Resident 4's room, observed Droplet Precautions and Contact Precautions signages posted on the wall next to Resident 4's room door on the right side. During an observation on 3/6/2026 at 11:22 a.m., outside Resident 4's room, observed Certified Nursing Assistant 2 (CNA 2) enter Resident 4's room without donning (put on) gown, gloves, and face shield. Observed CNA 2 remove Resident 4's water pitcher from the room and walked down the hallway. CNA 2 did not perform hand hygiene (the act of cleaning hands to remove germs, dirt, and contaminants, acting as the primary way to prevent the spread of infections) after exiting Resident 4's room. During an observation on 3/6/2026 at 11:30 a.m., outside Resident 4's room, observed CNA 2 enter Resident 4's room with a water pitcher. CNA 2 entered Resident 4's room without performing hand hygiene and without donning gown, gloves, and face shield. Observed CNA 3 place the water pitcher on Resident 4's bedside table and leave the room without performing hand hygiene. During an interview with CNA 2 on 3/6/2026 at 12:07 p.m., CNA 2 stated that she only needed to wear a gown and gloves when providing care to Resident 4 and not when entering or exiting the resident's room if she did not touch the resident. When asked why Resident 4 was placed on isolation precautions, CNA 2 stated that Resident 4 has a urine infection. During a concurrent interview and record review with the Infection Preventionist (IP) on 3/6/2026 at 12:23 p.m., the IP reviewed a facility document titled, Order Listing Report, which listed residents placed under isolation (separation of residents with an (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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>infection from residents without an infection). The IP stated that Resident 4 was placed on droplet and contact precautions due to influenza A. The IP stated that all staff entering Resident 4's room should perform hand hygiene and wear a face shield, disposable gown, and gloves to prevent the spread of influenza to other residents and staff. The IP stated that failing to wear the appropriate PPE had the potential to place other residents and staff at risk of contracting influenza A. During a review of the facility's policy and procedure (P&P) titled Isolation- Categories of Transmission-Based Precautions, reviewed 1/21/2026, the P&P indicated under Contact Precautions that staff and visitors should wear gloves when entering the room. Staff and visitors should wear a disposable gown upon entering the room and remove before leaving the room and avoid touching potentially contaminated surfaces with clothing after gown is removed. Under droplet precautions: the P&P indicated masks are worn when entering the room. Gloves, gown and goggles are worn if there is risk of spraying respiratory secretions.</p>		