

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555825	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/14/2025
NAME OF PROVIDER OR SUPPLIER San Marino Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 6812 N. Oak Avenue San Gabriel, CA 91775	
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 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 45099 Based on observation, interview and record review, the facility failed to ensure one (1) of two (2) sampled residents (Resident 1) privacy was protected while Resident 1 was using the restroom/bathroom on 2/28/2025 in accordance with the facility's policy titled, Resident Rights. This deficient practice violated Resident 1's rights to privacy and has the potential to have negative psychosocial (the combined influence of thoughts, feelings, behaviors, relationships and environment on a person's wellbeing and how they function) outcomes to the resident. Findings: During a review of Resident 1's Admission Record, the Admission Record indicated the resident was admitted to the facility on [DATE] with diagnoses of schizoaffective disorder (a mental illness that can affect thoughts, mood, and behavior) bipolar type (mood swings that range from the lows of depression to elevated periods of emotional highs). During a review of Resident 1's Minimum Data Set (MDS- a resident assessment tool), dated 2/10/2025, the MDS indicated Resident 1 had moderate cognitive (mental action or process of acquiring knowledge and understanding) skills for daily decision making. The MDS also indicated Resident 1 required substantial/ maximal assistance (helper does more than half the effort) with oral, toileting, and personal hygiene, shower, upper and lower body dressing and putting on/taking off footwear. The MDS further indicated Resident 1 required supervision (helper provides cues) with eating. During a review of Resident 1's progress notes dated 2/28/2025 at 2:42 PM, the progress notes indicated the Social Worker (SW) was informed by Resident 1 that Resident 2 went into the restroom and asked Resident 1 to get out because Resident 2 is going to take a shower. During a review of Resident 2's Admission Record, the Admission Record indicated the resident was initially admitted to the facility on [DATE] and readmitted on [DATE] with diagnoses of paranoid schizophrenia (a mental illness that is characterized by disturbances in thought) and major depressive disorder (a mood disorder that causes a persistent feeling of sadness and loss of interest). (continued on next page)		

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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F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	During a review of Resident 2's MDS, dated [DATE], the MDS indicated Resident 2 had moderate cognitive skills for daily decision making. The MDS also indicated Resident 2 required setup assistance (helper sets up or cleans up; resident completes activity) with toileting and personal hygiene, shower, and lower body dressing and was independent (resident completes the activity by himself with no assistance from a helper) with eating, oral hygiene, upper body dressing and putting on/taking off footwear. During a concurrent observation and interview on 3/14/2025 at 12:08 PM, the facility had a common restroom/bathroom (used for male and female) next to Resident 1's room. The restroom/ bathroom's doorknob did not have a lock/unlock feature and did not have a signage to indicate the restroom/bathroom was in use. Resident 1 stated the way the bathroom was set up there was no way an individual would know that someone was inside using it. Resident 1 also stated she felt her privacy was violated on 2/28/2025 when Resident 2 entered the restroom asking her to get out. During an interview on 3/14/2025 at 12:58 PM, Certified Nursing Assistant 1 (CNA 1) stated residents had the right to have privacy and dignity whether they are alert or not. CNA 1 also stated the sense of dignity is important for these residents and they would not want to be seen while using the restroom. CNA 1 further stated Resident 1 wanted privacy and dignity and should be respected. During an interview on 3/14/2025 at 1:30 PM, Licensed Vocational Nurse 1 (LVN 1) stated Resident 1 had the right to have privacy and dignity. LVN 1 also stated Resident 1's privacy was violated when Resident 2 entered the restroom while Resident 1 was using the restroom on 2/28/2025. LVN 1 further stated the facility had to ensure there are signages outside the bathrooms that indicated it is being used in that way other resident would know whether they can use the restroom/ bathroom or not. During an interview on 3/14/2025 at 2:53 PM, the Director of Nursing (DON) stated the facility should always protect their residents' rights for dignity and privacy. During a review of the facility's policy and procedure titled, Quality of Life - Dignity, revised, February 2020, indicated, each resident shall be cared for in a manner that promotes and enhances his or her sense of well-being, level of satisfaction with life, feeling of self-worth and self-esteem. The policy also indicated that the staff shall promote, maintain and protect resident privacy, including bodily privacy during assistance with personal care . During a review of the facility's policy and procedure titled, Resident Rights, revised, February 2021, indicated that Federal and state laws guarantee certain basic rights to all residents of the facility. The policy also indicated that these rights include the residents' rights to privacy.		