

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555827	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/23/2025
NAME OF PROVIDER OR SUPPLIER  Atherton Park Post-Acute		STREET ADDRESS, CITY, STATE, ZIP CODE  1275 Crane Street Menlo Park, CA 94025	

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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 31922</p> <p>Based on observation and interview the facility failed to ensure windows on the 2nd floor were:</p> <ol style="list-style-type: none"> <li>1. Secure from opening greater than 4 inches to prevent confused residents from jumping out windows.</li> <li>2. Inspected on a regular basis to ensure window securing devices were still functioning.</li> <li>3. Secure window with a device that is tamper proof.</li> </ol> <p>Failure to secure 2nd floor windows had the potential for confused residents to sustain serious injuries if they jump out of these windows.</p> <p>Findings:</p> <p>During observation on 05/23/2025 at 11:15 AM with the Administrator, windows in rooms 209, 212, 216 on the second floor were found without any device to limit how wide they could be opened. These windows could be opened to their full limit of at least 30 inches. These observations were confirmed with the Administrator.</p> <p>During an interview on 05/23/2025 at 11:30 AM, the Administrator stated there should be a mechanical limiter on those windows so that the windows could not be opened fully. The Administrator was asked to:</p> <ol style="list-style-type: none"> <li>1. Conduct an audit of the entire 2nd and 3rd floor to see if there were other windows with the same issue.</li> <li>2. Provide their policy regarding securing windows.</li> <li>3. Provide a sample of the device they used to limit window openings.</li> </ol> <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 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 05/23/2025 at 12:18 PM, the Assistant Maintenance Worker (AMW) explained the window limiting devices were a thumb screw that could be removed by staff to enable them to clean the windows. The AMW stated he checked all the windows once a week but does not document these checks. The AMW stated sometimes residents as well as visitors may remove these window limiters to open the window wider. The AMW was asked how wide these windows should be opened to with a window limiter. The AMW stated 3 inches.</p> <p>During an interview on 05/23/2025 at 12:45 PM the Administrator stated the facility conducted an audit and out of 80 windows, only windows in rooms [ROOM NUMBER] were found without limiters and could be opened fully. The Administrator stated they have no policy regarding securing and inspecting windows.</p> <p>During a concurrent observation and interview on 05/23/2025 at 12:50 PM the windows on the second floor: rooms 212 and a family therapy room were inspected with the AMW. The window in room [ROOM NUMBER] opened to 5.5 inches (with the window limiter in place), the window in the second floor family therapy room could be opened to 10.25 inches. There was no window limiter in place. But there was a wood screw, screwed into the window frame to limit the opening to 10.25 inches. During the interview the AMW admitted he did not check or measure how wide these windows could be opened to during his audit.</p>		