

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

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Form Approved OMB
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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 04/16/2026
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)		
F 0880 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide and implement an infection prevention and control program. Based on interview and record review, the facility failed to maintain an effective infection prevention and control program when two of five sampled staff did not receive N95 respirator (a mask that filters airborne particles very effectively) fit testing (a process used to determine N95 respirator fits properly). This failure had the potential for spread of airborne infections (an illness that spreads through tiny germs in the air that people can breathe in) to the residents, staff, and visitors. During an interview on 4/16/26 at 10:45 AM, Licensed Vocational Nurse (LVN) 1 stated the facility uses N95 respirators when there is a COVID-19 (an illness caused by a virus that spreads easily through the air) outbreak. LVN 1 opened a plastic cabinet with drawers containing N95 respirators, and stated, We have them here. These are what we use. When asked if she has been fit-tested for the N95 respirators, LVN 1 stated, No. The last time I was fit-tested was when I was in nursing school, more than three years ago. During an interview on 4/16/26 at 10:58 AM, the Infection Preventionist (IP) confirmed LVN 1 has no respirator fit testing record. The IP was asked if she had been fit-tested for N95 respirator. The IP answered, Not here. I did it when I worked at (name of hospital). That was three years ago. During an interview on 4/16/26 at 1:24 PM, The IP stated staff must use an N95 respirator that has been fit-tested for them when caring for residents with COVID-19. The IP stated, We use enhanced respiratory precautions (ERP, extra safety steps used to stop the spread of serious respiratory infections) for residents (with COVID-19 infection). The IP stated further, It protects them (residents and staff) from getting sick. If not wearing the correct one, they (staff) could be spreading it more. Particles can potentially escape or get in when they are not being covered properly. During a concurrent interview and facility document review on 4/16/26 at 1:59 PM, the IP was asked for the facility's policy for ERP. The IP provided a facility document titled, Enhanced Respiratory and Contact Precautions (ERCP), dated 3/2023, and stated, This is what we use for COVID. The IP stated she could not find a separate policy for ERP. Review of the ERCP indicated All staff must wear respirator: N95 or higher level respirator. During an interview on 4/16/26 at 3:11 PM, the Director of Nursing (DON) stated staff need fit testing for respirators to make sure that their mask is well-fitted in a way that there is no room for contamination. The DON stated that fit testing must be done annually because people can gain or lose weight, their face can change in a year. Review of facility policy, titled Personal Protective Equipment - Face Masks, revised in 7/2009 indicated Facility personnel must wear appropriate facial protection when there is risk of exposure to blood, body fluids, splashes, or airborne infectious agents. This includes . N95 respirators when airborne protection is required. 2. N95 Respirators and Fit testing (Airborne Protection) Employees are required to wear a NIOSH-approved (National Institute for Occupational Safety and Health, a federal agency that makes sure masks like N95s work properly and helps keep workers safe from harmful exposures) N95 respirator for airborne precautions must participate in the facility's Respiratory Protection Program per OSHA standards (Occupational Safety and Health Administration, a federal agency that protect workers by creating safety rules to reduce hazards in the workplace) . Medical Evaluation and Fit Testing - Initial fit testing is required before first use on the specific model, style, and size to be worn. Annual fit testing is required every 12 months.		

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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