

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555893	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/28/2025
NAME OF PROVIDER OR SUPPLIER  Pasadena Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1570 North Fair Oaks Ave Pasadena, CA 91103	

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 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Permit a resident to return to the nursing home after hospitalization or therapeutic leave that exceeds bed-hold policy.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 48678</p> <p>Based on observation, interview, and record review, the facility failed to readmit three of seven residents (Resident 1, 2, and 3) after Facility 1 was cleared to repopulate (transfer back residents to the facility from the previous temporary location when residents were evacuated) back their residents on 1/17/2025.</p> <p>This deficient practice resulted in:</p> <ol style="list-style-type: none"> <li>1. Resident 1 residing at Facility 2 from 1/17/2025 to 2/7/2025 (22 days) without the knowledge and consent from the resident's responsible party (RP-an individual, or a placement agency, who assists the resident in placement or assumes varying degrees of responsibility for the well-being of the resident, as designated by the resident in writing) to permanently place resident at Facility 2.</li> <li>2. Resident 2 residing at Facility 2 from 1/17/2025 to 2/7/2025 (22 days) without the knowledge and consent from the resident's conservator (an appointed person to act or make decisions for the person who needs help) to permanently place the resident at Facility 2.</li> <li>3. Resident 3 residing at Facility 3 from 1/17/2025 to 2/7/2025 (22 days) without the knowledge and consent from her RP to permanently place the resident at Facility 3.</li> </ol> <p>This placed Patients 1, 2, and 3 at risk for psychosocial harm and compromised continuity of care.</p> <p>Findings:</p> <p>1. During a review of Resident 1's Admission Record (from Facility 1), indicated Resident 1 was admitted at Facility 1 on 11/26/2024 with diagnosis of dementia (progressive impaired ability to think, remember or make decisions that interferes with doing everyday activities).</p> <p>During a review of Resident 1's Minimum Data Set (MDS- a standardized resident assessment and care screening tool) dated 12/2/2024, indicated Resident 1 had moderate cognitive impairment (inability to think, learn, remember, or make decisions). The MDS indicated Resident 1 required supervision (helper provides verbal cues and or touching as resident competes activity. Assistance may be provided throughout the activity or intermittently) for toileting, bathing, lower body dressing, personal hygiene, rolling left and right, sitting on the side of the bed to lying flat on the bed, sitting up, and transferring from a bed to a chair.</p> <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 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of Resident 1's Physician's Discharge Summary, undated and unsigned by a physician, indicated Resident 1 was transferred to Facility 2 on 1/8/2025 due to emergency evacuation.</p> <p>During an interview on 1/27/2025 at 11:30 AM with Administrator 2 at Facility 2, Administrator 2 stated Facility had taken back some of the residents that were evacuated, and only two residents (Resident 1 and 2) remained at Facility 2, but the plan was for them (Residents 1 and 2) to go back to Facility 1 once Facility 1 was cleared for their residents to repopulate.</p> <p>During a concurrent observation and interview on 1/27/2025 at 11:45 AM with Resident 1, in Facility 2's dining room, Resident 1 stated she is waiting to go back to Facility 1 but has not been informed nor asked if she desires to return to Facility 1.</p> <p>During an interview on 1/28/2025 at 9:30 AM with Administrator 1 (administrator of the facility), Administrator 1 stated Resident 1 was evacuated to Facility 2 on 1/8/2025 and that Facility 2 was a better fit for the resident and therefore Resident 1 would not return Facility 1.</p> <p>During an interview on 1/28/2025 at 10:20 AM with Licensed Vocational Nurse (LVN- licensed nurse from the facility), LVN stated Facility 1 was responsible for notifying resident's responsible party, if the residents had any cognitive impairment regarding transfers and discharges, and other necessary information that requires consent. LVN stated the reason Resident 1 was not readmitted back to Facility 1 was because LVN did not think it was safe for Resident 1 to reside at Facility 1 due to Resident 1 being older, and because LVN thought Facility 2 was a better fit for Resident 1. LVN stated Facility 1 did not inform and get consent from Resident 1's RP's and interdisciplinary team regarding Resident 1 not coming back to Facility 1.</p> <p>During a phone interview on 1/28/2025 at 10:49 AM with Resident 1's RP's, the RP stated she had not been notified about Resident 1 not being able to return to Facility 1, and RP stated she wants her mom (Resident 1) to be transferred back to Facility 1 because she does not want her mom to stay at Facility 2.</p> <p>2. During a review of Resident 2's Admission Record (from Facility 1), indicated Resident 2 was admitted at the facility on 1/1/2014 with diagnosis of intellectual disabilities (a lifelong condition that affects a person's ability to learn, communicate, and perform daily tasks), bipolar disorder (sometimes called manic-depressive disorder; mood swings that range from the lows of depression to elevated periods of emotional highs), encephalopathy (disease of the brain that alters brain function or structure) disturbance of brain function, it causes confusion, memory loss and coma in severe cases), and dementia.</p> <p>During a review of Resident 2's MDS, dated [DATE], the MDS indicated Resident 2 had severely impaired cognition (ability to think, learn, and make decisions). The MDS indicated Resident 2 was dependent (helper does all of the effort, resident does none of the effort to complete the activity) on staff for toileting, bathing, dressing, personal hygiene, and required maximal assistance (helper does more than half the effort to lift or hold trunk or limbs and provides more than half the effort) for oral hygiene, roll left and right, sit to lying, sit to stand, and chair/bed transfer.</p> <p>During a review of Resident 2's Physician's Discharge Summary, undated and unsigned by a physician, indicated Resident 2 was transferred to Facility 2 on 1/8/2025 due to emergency evacuation.</p> <p>(continued on next page)</p>		

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<p>F 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview on 1/28/2025 at 10:25 AM with LVN, LVN stated Resident 2 was not readmitted back to Facility 1 as of 1/28/2025. LVN stated Facility 1 did not inform and get consent from Resident 2's RP to have Resident 2 permanently admitted at Facility 2.</p> <p>During an interview on 1/28/2025 at 10:42 AM with the Director of Nursing (DON) from the facility, stated she was not part of the decision-making process to determine if the residents (Resident 1, 2, and 3) who were evacuated were to return to Facility 1 after Facility 1 was cleared to repopulate on 1/17/2025.</p> <p>During a phone interview on 1/28/2025 at 11:05 AM with Resident 2's RP, the RP stated she could not find any documentation regarding Resident 2 would not return to Facility 1. RP stated Administrator 1 had left a voicemail stating Facility 1 would not take Resident 2 back because the resident causes a lot of problems and the staff is exhausted and RP stated, RP never gave consent for that decision.</p> <p>3. During a review of Resident 3's Admission Record (from Facility 1), indicated Resident 3 was admitted to the facility on [DATE] with diagnosis of encephalopathy, dementia, and Alzheimer's disease (a disease characterized by a progressive decline in mental abilities).</p> <p>During a review of Resident 3's MDS, dated [DATE], the MDS indicated Resident 3 had intact cognition. The MDS indicated Resident 3 required partial assistance (helper does less than half the effort to lift, hold, or support trunk or arms and legs, but provides less than half the effort) on staff for toileting, bathing, dressing, roll left and right, sit to lying, sit to stand, and chair/bed transfer.</p> <p>During a review of Resident 3's Physician's Discharge Summary, undated and unsigned by a physician, indicated Resident 3 was transferred to Facility 2 on 1/8/2025 due to emergency evacuation.</p> <p>During an interview on 1/28/2025 at 10:29 AM with LVN, LVN stated the reason Resident 3 was not readmitted back to Facility 1 was because LVN believed it was not safe for Resident 3 to be at Facility 1 due to the resident's older demographic, since currently Facility 1 had a younger demographic. LVN stated Facility 1 did not inform Resident 3's RP that Resident 3 would not be coming back to Facility 1.</p> <p>During a phone interview on 1/28/2025 at 12:37 PM with Resident 3's RP, RP stated she had not been notified by Facility 1 that Resident 3 would not be returning to Facility 1. RP stated she found out Resident 3 was moved to Facility 2 and from Facility 2, the resident was moved to Facility 3 on 1/22/2025. RP stated it was Facility 2 who contacted the RP to inform RP that Resident 3 had been transferred to Facility 3 on 1/22/2025. RP stated, currently, Resident 3 resides at Facility 3, and RP wanted Patient 3 to go back to Facility 1 where the patient was evacuated from.</p> <p>During an interview on 1/27/2025 at 1:05 PM with the DON 3 (DON of Facility 3), stated she had Resident 3 from the facility and had not been informed by Facility 1 staff if or when Resident 3 would be returning to the Facility 1 where resident was evacuated from. The DON 3 stated she had not been informed why Resident 3 was still at Facility 3, nor if the resident chose to stay at Facility 3.</p> <p>During a review of the facility's census dated 1/27/2025 indicated the facility had 12 beds available.</p> <p>(continued on next page)</p>		

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<p>F 0626</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During a review of the facility 1's policy and procedure titled Transfer or Discharge Notice, dated December 2016, the policy indicated the resident and/or representative will be notified in writing of the following information:</p> <ul style="list-style-type: none"> <li>a. The reason for the transfer or discharge.</li> <li>b. The effective date of the transfer or discharge.</li> <li>c. The location to which the resident is being transferred or discharged .</li> <li>d. A statement of the resident's rights to appeal the transfer or discharge, including: <ul style="list-style-type: none"> <li>(1) the name, address, email and telephone number of the entity which receives such requests.</li> <li>(2) information about how to obtain, complete and submit an appeal form; and</li> <li>(3) how to get assistance completing the appeal process.</li> </ul> </li> </ul> <p>The policy further indicated the reasons for the transfer or discharge will be documented in the resident's medical record. At the time of notification, the facility will provide each resident and responsible party with the following information:</p> <ul style="list-style-type: none"> <li>a. The plan for the transfer and adequate relocation of the resident.</li> <li>b. The date by which the transfer/relocation will be completed; and</li> <li>c. Assurances that the resident will be transferred to the most appropriate facility or setting to meet his or her needs in terms of quality, service and location. In determining the transfer location for a resident, the decision to transfer to a particular location will be determined by the needs, choices and best interests of that resident.</li> </ul> <p>During a review of the facility's policy and procedure titled Admission Criteria, dated March 2019, the policy indicated prior to admission, the resident or representative is informed of any service limitations or special characteristics of the facility. The interdisciplinary team determines whether the facility is capable of meeting the needs and services of the potential resident that are outlined in the evaluation.</p>