

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555908	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  02/05/2025
NAME OF PROVIDER OR SUPPLIER  South Pasadena Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  904 Mission St South Pasadena, CA 91030	

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 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46919</p> <p>Based on interview and record review, the facility failed to ensure one of two sampled residents (Resident 1) was treated with respect and dignity by failing to ensure the television volume was in a comfortable level in Resident 1's room.</p> <p>This deficient practice resulted in a confrontation between Resident 1 and Resident 2 regarding the volume of the television in the room and violated Resident 1's right to be treated with dignity.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record, the Admission Record indicated Resident 1 was initially admitted to the facility on [DATE] and was readmitted on [DATE] with diagnoses that included chronic obstructive pulmonary disease (COPD- a chronic lung disease causing difficulty in breathing), type 2 diabetes mellitus with diabetic chronic kidney disease (DM- a disorder characterized by difficulty in blood sugar control and chronic kidney damage due to high blood sugar levels), and acute respiratory failure with hypoxia (a medical condition where the lungs are unable to adequately exchange oxygen, leading to a dangerously low level of oxygen in the blood).</p> <p>During a review of Resident 1's Minimum Data Set (MDS- a resident assessment tool), dated 1/15/2025, the MDS indicated Resident 1 was assessed having moderately impaired cognitive (mental action or process of acquiring knowledge and understanding) skills for daily decision making. Resident 1 required supervision or touching assistance with eating, oral hygiene, and upper body dressing. Resident 1 required partial moderate assistance (helper does less than half the effort) with toileting hygiene, lower body dressing, toilet transfer and walking 10 feet.</p> <p>During a review of Resident 1's SBAR (situation, background, assessment, recommendation- a communication tool used by healthcare workers when there is a change of condition among the residents) Communication Form and progress note, dated 1/20/2025 at 12 AM, the SBAR Communication Form, under Situation, indicated an exchange of words was heard from Resident 1's room. The SBAR Communication Form, under Nursing Notes, indicated Resident 1 stated that Resident 2's television (TV) volume was too loud that he cannot go to sleep.</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a review of Resident 1's Interdisciplinary Team (IDT- a group of healthcare professionals who work together to help people receive the care they need) Conference Record, dated 1/20/2024, the IDT Conference Record indicated Resident 1 stated Resident 2's television was loud, he couldn't sleep so he walked Resident 2's bedside and turned off his television.</p> <p>During a review of Resident 1's Psychiatric Follow Up Note, dated 1/20/2025, the Psychiatric Follow Up Note indicated Resident 1 stated he told Resident 2 to lower the volume on the television set. Resident 1 went to bedside of Resident 2. Resident 1 stated he argued with Resident 2 and did not physically harm him.</p> <p>During a review of the Interview/Investigation Record, written by the Administrator (ADM), on 1/20/2025, at 10 AM, the Interview/Investigation Record indicated, Resident 1 expressed that he wanted to sleep but was unable to do so because Resident 2 had the television on at a loud volume.</p> <p>During a review of the Interview/Investigation Record, written by the ADM, on 1/20/2025, at 10 AM, the Interview/Investigation Record indicated, Resident 2 explained that there was a disagreement with Resident 1 regarding the volume of the television. According to Resident 2, Resident 1 was unhappy with the volume and attempted to lower it.</p> <p>During an interview with Licensed Vocational Nurse 1 (LVN 1), on 2/5/2025, at 12:48 PM, LVN 1 stated facility staff round (the process of seeing resident in the facility to assess what they need) the stations every shift to make sure the residents' needs are met. LVN 1 stated the incident happened close midnight which was quiet time in the facility. LVN 1 stated facility staff should have lowered the television's volume during rounds in Resident 1 and Resident 2's room if the television volume was too loud. LVN 1 stated Resident 1 had the right to be in a room with the television in a comfortable volume.</p> <p>During an interview with Registered Nurse 2 (RN 2), on 2/5/2025, at 1:29 PM, RN 2 stated, the facility staff check the residents' comfort and address their needs during night rounds. RN 2 stated the television volume in Resident 1 and Resident 2's room should have been placed in a low and comfortable setting because it was already quiet time at the facility. RN 2 stated facility staff should have asked Resident 2 to lower the volume of the television in the room. RN 2 stated Resident 1 was not provided a comfortable room on 1/20/2025 because the television volume was too loud.</p> <p>During a review of the facility's policy and procedure (P&amp;P), titled, Resident Dignity &amp; Personal Privacy, reviewed on 4/2023, the P&amp;P indicated, The facility provides care for residents in a manner that respects and enhances each resident's dignity, individuality, and right to personal privacy. The P&amp;P also indicated, Care for residents in a manner that maintains dignity and individuality: Maintain radio and television on desired setting. Do not change settings without resident's permission.</p> <p>During a review of the facility's P&amp;P, titled, Resident Rights, dated 5/2/2024, the P&amp;P indicated, Employees shall treat all residents with kindness, respect, and dignity. The P&amp;P further indicated, Federal and state laws guarantee certain basic rights to all residents of the facility. These rights include the Resident's right to: a dignified existence, be treated with respect, kindness, and dignity.</p>		