DEPARTMENT OF HEALTH AND HUM/ 'ERVICES
CENTERS FOR MEDICARE & MEDICAIL SERVICES

PRINTED: 11/15/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555066	A. BUILDING ______ B. WING ______	C 11/08/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FILLMORE CONVALESCENT CENTER	118 B ST FILLMORE, CA 93015

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health, Licensing and Certification during a Federal Abbreviated Survey. CA00332276 Representing the Department: HFEN 29675 HFEN trainee 31699 The inspection was limited to the specific allegation of the complaints and does not reflect the findings of a full inspection of the facility.	F 000	*Preparation and execution of correction does not constitute admission or agreement by Fillmore Convalescent Center of the truth of the fact alleged or conclusion set forth of the Statement of Deficiencies. This plan of correction is prepared and/or executed solely because it is required by the provision of the Health and Safety Code Section 1280 and 42 C.F.R. 483 et.se.*	
F 164 SS=D	483.10(e), 483.75(l)(4) PERSONAL PRIVACY/CONFIDENTIALITY OF RECORDS The resident has the right to personal privacy and confidentiality of his or her personal and clinical records. Personal privacy includes accommodations, medical treatment, written and telephone communications, personal care, visits, and meetings of family and resident groups, but this does not require the facility to provide a private room for each resident. Except as provided in paragraph (e)(3) of this section, the resident may approve or refuse the release of personal and clinical records to any individual outside the facility. The resident's right to refuse release of personal and clinical records does not apply when the resident is transferred to another health care	F 164		

accepted plan of correction 11/28/12 addendum via telephone to administrator

CA DEPT OF PUBLIC HEALTH
2012 NOV 28 PM 12:47
LICENSING & CERTIFICATION VENTURA DISTRICT OFFICE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Mary El. Dmmms
TITLE: Administrator
(X6) DATE: 11/28/12

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.

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F 164	Continued From page 1 institution; or record release is required by law. The facility must keep confidential all information contained in the resident's records, regardless of the form or storage methods, except when release is required by transfer to another healthcare institution; law; third party payment contract; or the resident. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to provide a private area for residents to meet with family visitors and the ombudsman resulting in the potential for anyone to hear personal information for one of two sampled residents (Resident 1). Findings: During an observation on 11/8/12 at 9 a.m., in the small dining room there were staff members weighing residents on the scale that is built into the floor in the small dining room. There are large windows that face the hallway and nursing station for nursing stations one and two that do not have any curtains that can be closed. During an interview with the ombudsman (OMB) on 11/8/12 at 9:25 a.m., the OMB indicated that she often has to meet with residents and family members in the main dining room area. The OMB stated, "We talk in a low tone and there are other noises going on around us because there are usually activities going on in the dining room." The OMB also indicated the small dining room is often unavailable because of staff meetings and	F 164	F164 **CORRECTIVE ACTION:** -Blinds were installed on small dining room windows to provide viewing privacy. -Social Services Office, Admission Office, Room 5 is also available for resident's private visits. **IDENTIFYING OTHER RESIDENTS HAVING THE POTENTIAL TO BE AFFECTED:** -All residents have the potential to be at risk. **MEASURES AND SYSTEMIC CHANGES:** -On ASCP meeting (Admission Seven Day Care Plan Meeting) and Care Plan meetings, Activities Director will inform to resident and or responsible party about the private areas we have available for resident's private visits, and the way to request it. -Activities Director, on the Resident Council Meeting will be reminding Residents about availability of private areas for residents' private meetings and the way to request it. -Activities Director will be responsible to assign a private area upon request. -Activities Director will maintain a log of all requests and the private areas assigned for each request. SSD will ask Ombudsman if in need of a privat room BL **HOW FACILITY WILL MONITOR:** -Activities Director will report to QA on a monthly basis and will attach copy of the log to the QA report. **CORRECTIVE ACTION COMPLETED:** -November 27th, 2012.	

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F 164	Continued From page 2 there are glass windows which do not offer full privacy due to lack of curtains on the window that can be closed. During an interview with Resident 1's family member (FM) on 11/8/12 at 1:30 p.m., the FM stated, "There isn't anywhere in here where we can have a private conversation, or meet in private with mother. In the past we have had to meet with the ombudsman and we were forced to meet in the main dining room where there were activities going on and all sorts of people were coming and going constantly. The facility has suggested the small dining room, but there are always staff members in there, because that's where they have their staff meetings." During an interview with the administrator (ADM) on 11/7/12 at 3:30 p.m., the ADM indicated that the small dining room was the usual meeting place to be utilized for families wanting to meet privately with the residents or the ombudsman. A record review on 11/8/12 indicated that under the facility's admission agreement, page 52, that residents are "to be allowed privacy for visits with family, friends, clergy, social workers or for professional or business purposes."	F 164		
F 252 SS=E	483.15(h)(1) SAFE/CLEAN/COMFORTABLE/HOMELIKE ENVIRONMENT The facility must provide a safe, clean, comfortable and homelike environment, allowing the resident to use his or her personal belongings to the extent possible.	F 252		

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F 252	Continued From page 3 This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to provide hot water resulting in cold showers, potential for illness, and hypothermia (a potentially fatal condition, occurs when body temperature falls below 95°F) for 22 of 79 residents (resident rooms 20 through 32). Findings: During an observation and concurrent interview with direct care coordinator (DCC) on 11/8/12 at 8 a.m., resident room water temperatures in one building wing (resident rooms numbered 20 through 32) ranged from 79 degrees to 94 degrees using the facility's thermometer. Shower room 4A on the same wing had a temperature of 94.5 degrees, and shower room 4B had a temperature of 83.5 degrees using the facilities thermometer, after the water had been left running for five minutes with the handle turned all the way to the hottest setting. In one room there was no hot water at all and the water room water temperature was 72 degrees. The DCC explained that the residents in the room were unable to wash hands by themselves and could not provide any explanation as to why there was no hot water at all. Water temperatures were confirmed by the DCC. The DCC also indicated that the water temperatures in shower room 4A and 4B were too cold to be used on residents. The DCC indicated that facility thermometer was brand new and the calibration log could not be located. During an interview with an unsampled resident (Resident 4) on 11/8/12 at 8:43 a.m., Resident 4 indicated that the water in the room sink was	F 252	**F252** **CORRECTIVE ACTION:** -2 valves were replaced on the system. -A hot and cold water mixer was replaced on one of the showers on the south wing. **IDENTIFYING OTHER RESIDENTS HAVING THE POTENTIAL TO BE AFFECTED:** -All residents have the potential to be at risk. **MEASURES AND SYSTEMIC CHANGES:** -Maintenance Supervisor or designee will be checking water temperatures for all sinks and showers on a monthly basis, and will keep a log. -Guardian Angels will randomly ask their residents if the water temperature is Ok on the showers. **HOW FACILITY WILL MONITOR:** -Maintenance Supervisor will report to QA on a monthly basis, and will attach copy of the water temperature logs to the QA report. -Maintenance Supervisor will inform the Administrator if any of the temperature readings are not in compliance. **CORRECTIVE ACTION COMPLETED:** -November 13th, 2012.	

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F 252	Continued From page 4 always "cold." During an interview with a certified nursing assistant (CNA 1) on 11/8/12 at 8:46 a.m., CNA 1 indicated the water needs to run for about three to four minutes "to warm up" and the water temperature issues only occurred on this side of the building. During a record review and concurrent interview with a maintenance worker (MW) on 11/8/12 at 9:45 a.m., the MW indicated the records for maintenance work performed on the water heaters could not be located. The MW indicated the two tankless water heaters had been installed in July of 2009. The MW indicated that one water heater was specifically for the kitchen and the laundry areas and that the other water heater was for the rest of the building. Logs for facility water temperature monitoring could not be located. During an interview with the human resources supervisor (HRS) on 11/8/12 at 9:50 a.m., the HRS indicated that the facility had problems in the past with "water being too cold." During an interview with a housekeeper (HK) on 11/8/12 at 10:20 a.m., the HK indicated that there had been a problem with the water being too cold for the past "couple of months for rooms 20 through 32 and shower room 4A and 4B." During an interview with CNA 1 on 11/8/12 at 10:30 a.m., CNA 1 indicated that she used shower rooms 4A and 4B daily to shower residents in. CNA 1 stated that she had to "leave the water running in the residents bathroom sink in order to get warm water to the shower rooms".	F 252		

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F 252	Continued From page 5 CNA 1 also stated, "You need to let the water run for a long time to get warm water in the residents bathroom sinks." CNA 1 indicated that showers began at approximately 6:45 a.m. and were completed by 10 a.m. daily. During an interview with Resident 2 on 11/8/12 at 10:40 a.m., Resident 2 indicated that the water had been cold since she started living at the facility. Resident 2 also indicated that she went "shower shopping" to find the best shower because the shower rooms on her hallway were "always cold." During an interview with an unsampled resident (Resident 3) on 11/8/12 at 10:40 a.m., Resident 3 indicated that the water temperature in shower rooms 4A and 4B were always cold. During an interview with an unsampled resident (Resident 5) on 11/8/12 at 3:45 p.m., Resident 5 stated, "There are many more cold shower days than not." Resident 5 also indicated that the water had been cold for a long time and that is was not a new problem. During an interview with an unsampled resident (Resident 6) on 11/8/12 at 3:50 p.m., Resident 6 indicated that he does not use the showers on this side because they are cold. Resident 6 indicated that he makes the CNA's take him to another wing to be showered. During an interview with CNA 2 on 11/8/12 at 3:58 p.m., CNA 2 indicated that it takes about five minutes to get warm in the sinks in the room. CNA 2 also indicated that when he has had to shower a resident in the afternoon that the water	F 252		

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F 252	Continued From page 6 in shower room 4A and 4B has sometimes been cool.	F 252		