

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/08/2017  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055287	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  C 06/01/2017
NAME OF PROVIDER OR SUPPLIER  VALLEY PALMS CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 13400 SHERMAN WAY N HOLLYWOOD, CA 91605		
(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)	2017 JUN 14 PM 4:16 CORRECTION DATE 06/14/17 ACHTMIS	
F 000	<p><b>INITIAL COMMENTS</b></p> <p>The following reflects the findings of the California Department of Public Health during the investigation of a complaint.</p> <p>Complaint number: 516339</p> <p>Representing the Department: HFEN #18038</p> <p>The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility.</p>	F 000	<p>By submitting this POC, Valley Palms Care Center does not admit or concede the facts and contentions cited, or the existence or scope or severity of the deficiencies and conditions cited in the 2567. The POC is submitted to comply with federal and state law. Valley Palms Care Center respects the allegations made in the 2567 have acted and will continue to act to implement this POC.</p> <p>F - 505</p>		
F 505 SS=D	<p>One deficiency was issued for complaint 516339.</p> <p><b>483.50(a)(2)(ii) PROMPTLY NOTIFY PHYSICIAN OF LAB RESULTS</b></p> <p>(a) Laboratory Services</p> <p>(2) The facility must-</p> <p>(ii) Promptly notify the ordering physician, physician assistant, nurse practitioner, or clinical nurse specialist of laboratory results that fall outside of clinical reference ranges in accordance with facility policies and procedures for notification of a practitioner or per the ordering physician's orders.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record, the facility failed to promptly notify the physician of abnormal laboratory results for one of two sampled residents (Resident 1). Resident 1's lab finding</p>	F 505	<p><b><u>CORRECTIVE ACTION</u></b></p> <p>Resident (1) was transferred to the acute hospital and is no longer in the facility.</p> <p><b><u>IDENTIFICATION OF OTHER RESIDENTS AND CORRECTIVE ACTION</u></b></p> <p>All residents have the potential to be affected by the alleged deficient practice contained herein; therefore the facility initiated corrective action to prevent reoccurrence. A clinical record review was conducted for all current residents with recent orders for X-rays to ensure that the physician was notified timely if there were abnormal results. There were no residents affected.</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X5) DATE

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 505	<p>Continued From page 1</p> <p>Indicated the resident had pleural effusion (a buildup of fluid in the pleural space, an area between the layers of tissue that line the lungs and the chest cavity) and the licensed staff notified the physician approximately five (5) hours after receipt of the laboratory results. As a result Resident 1 was admitted to the general acute care hospital.</p> <p>Findings:</p> <p>Resident 1 was originally admitted, on 10/18/16, and re-admitted back to the facility on 11/19/16, with diagnoses which included pleural effusion and atrial fibrillation (irregular fibrillation). A review of the resident's minimum data set, dated 10/25/16, indicated the resident had the ability to understand and make self understood with clear speech clarity.</p> <p>A review of Resident 1's care plans for pleural effusion, dated 10/31/16, indicated the goal was for the resident to be free from respiratory distress. The care plan interventions included for nursing to report significant abnormal vital sign results to the physician.</p> <p>A review of Resident 1's nurses notes, dated 12/3/16, at 2 p.m., indicated the resident was on antibiotic therapy with increased white blood cells (indicating possible infection) with no adverse reactions. Fluid was encouraged as tolerated, but the resident refused all oral medications and was not eating. The nurses notes indicated Resident 1's vital signs were within normal limits.</p>	F 505	<p><u>MEASURES ADOPTED FOR SYSTEMIC CHANGE</u></p> <p>The Clinical Resource Nurse provided re-education on 6/9-12/2017 to the licensed nurses regarding: Physician Notification of Abnormal X-ray Results.</p> <p>The Nursing Supervisor and Director of Staff Development will conduct a daily spot check of the X-ray log for review of X-ray results and timely notification.</p> <p>Medical Records Department will audit telephone orders daily for X-rays to ensure compliance of proper notification.</p> <p><u>MONITORING PERFORMANCE AND INTEGRATION INTO THE QAA SYSTEM</u></p> <p>The Director of Nursing will report findings of the resident's X-ray monitoring results at the monthly QA Committee for three (3) months for further review.</p>	6/12/17	

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F 505	<p>Continued From page 2</p> <p>blood pressure 131/74 mm/hg, 98.4 degrees Fahrenheit body temperature, pulse rate 74, 20 breaths per minute, and oxygen saturation 95% (percentage of oxygen carried in the bloodstream) with no complaints. Further review of the nurses notes indicated at 3 p.m., the on-call physician was notified and made aware of the resident's poor appetite. According to the notes a chest x-ray was ordered by the physician.</p> <p>A review of Resident 1's radiology chest x-ray report, dated 12/3/16, at 5:55 p.m., indicated layering pleural right pleural effusion with bilateral lung opacities (Opacities in the lungs are seen on a chest radiograph when there is a decrease in the ratio of gas to soft tissue in the lungs).</p> <p>A review of Resident 1's nurses notes, dated 12/3/16, at 10:30 p.m., indicated the physician was notified of the resident's x-ray result.</p> <p>A review of the resident's change of condition SBAR form, dated 12/4/16, at 9:45 a.m., indicated the licensed nurse left a message for the physician to follow up from the previous phone call regarding the Resident 1's x-ray results. At 9:50 a.m., the registered nurse assessed the resident in bed who was awake and alert and able to answer simple questions with a clear voice. The resident's lungs were checked with no abnormal lung sounds, cough or unlabored breathing. The change of condition SBAR form indicated Resident 1 continued to refuse medications. At 10 a.m., the physician ordered to transfer the resident to the emergency room hospital.</p>	F 505			

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F 505	<p>Continued From page 3</p> <p>On 2/16/17, at 11 a.m., during an interview, the Director of Nursing stated, it was the responsibility of the licensed nurses to ensure the laboratory results were communicated with the physician.</p> <p>A review of Resident 1's Emergency Summary Report from the general acute care hospital, dated 12/5/16, at 7:38 p.m., indicated the resident was identified with moderate bilateral pleural effusion that mildly decreased in size on the right side, stable mild to moderate cardiomegaly and pulmonary vascular congestion and edema (heart and lungs are enlarged). In addition, a thoracentesis was performed clearing 1000 cc of clear yellow fluid from the right pleural space (The pleural space is the space surrounding the lungs. A thoracentesis is an invasive procedure to remove fluid or air from the pleural space for diagnostic or therapeutic purposes).</p> <p>A review of the facility's policy and procedure titled, "Lab and Diagnostic Test Results," revised September 2012, indicated the nurse would review all results. Nursing staff would consider the following factors to help identify situations requiring prompt physician notification concerning lab or diagnostic test results. The physician had requested to be notified as soon as result was received. The result was something that should be conveyed to a physician regardless of other circumstances (that is, the abnormal result is problematic regardless of any other factors).</p>	F 505					