

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

PRINTED: 09/07/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055335	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 08/17/2023
NAME OF PROVIDER OR SUPPLIER LA PALOMA HEALTHCARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 3232 THUNDER DRIVE OCEANSIDE, CA 92056		
(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 during the investigation of a complaint. Complaint Number: CA00854024 Facility Reported Incident Number: CA00854347 Representing the Department: Health Facilities Evaluator Nurse: 45909 The inspection was limited to the specific complaint and Facility Reported Incident investigated and does not represent the findings of a full inspection of the facility. One deficiency was identified for the complaint number: CA00854024 (Refer to Ftag 550). No deficiency was identified for facility reported number: CA00854347	F 000			
F 550 SS=D	Resident Rights/Exercise of Rights CFR(s): 483.10(a)(1)(2)(b)(1)(2) §483.10(a) Resident Rights. The resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility, including those specified in this section. §483.10(a)(1) A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's	F 550	Preparation and/or execution of this Plan of Correction does not constitute admission or agreement by La Paloma Healthcare Center to the allegation or conclusions set forth in the Statement of Deficiencies. This Plan of Correction is prepared and/or executed solely because it is required by provisions set forth in Federal and State law. None of the actions taken by the facility pursuant to the Plan of Correction should be considered an admission that a deficiency existed or that additional measures should have been in place at the time of the Survey. This Plan of Correction serves as our credible Allegation of Compliance with Federal and State Regulations.		

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

TITLE

(X6) 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 550	<p>Continued From page 1</p> <p>individuality. The facility must protect and promote the rights of the resident.</p> <p>§483.10(a)(2) The facility must provide equal access to quality care regardless of diagnosis, severity of condition, or payment source. A facility must establish and maintain identical policies and practices regarding transfer, discharge, and the provision of services under the State plan for all residents regardless of payment source.</p> <p>§483.10(b) Exercise of Rights. The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.</p> <p>§483.10(b)(1) The facility must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility.</p> <p>§483.10(b)(2) The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to honor resident 's preference for one of three sampled residents (Resident 1) when Resident 1 was showered despite his refusal. This failure had the potential to affect Resident 1 ' s emotional well-being.</p> <p>Findings: A review of Resident 1 ' s admission record</p>	F 550	<p>F 550</p> <p><i>What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice.</i></p> <p>Sweep of the building conducted to ensure that shower preferences for all residents are updated.</p> <p><i>How the facility will identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken.</i></p> <p>All Residents have the potential to be affected by this deficient practice. All direct care staff inserviced regarding the facility policy for Residents Rights with a focus on Rights to self-determination, individual shower preferences, and refusal of showers.</p> <p><i>What measures will be put into place or what systemic changes the facility will make to ensure that the deficient practice does not recur.</i></p> <p>In addition to the above inservice, the IDT team to conduct room rounds 3x/week x 1 month, then 2x/week ongoing to ensure that resident shower preferences are updated and that resident shower preferences are honored.</p>		

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F 550	<p>Continued From page 2</p> <p>indicated he had diagnoses of hemiplegia (weakness to one side of the body), hypertension (elevated blood pressure). A review of Resident 1 's minimum data assessment (MDS, an assessment tool) Section C Cognitive Patterns dated 7/19/23 indicated Resident 1 's cognition was intact.</p> <p>An interview was conducted on 8/9/23 at 12:31 P.M with Resident 1. Resident 1 stated on 7/31/23 at approximately 7:00 A.M. - 8:00 A.M., certified nursing assistant (CNA) 1 offered him a shower. He (Resident 1) told CNA 1 he did not want to have a shower. Resident 1 instead agreed to a bed bath. Resident 1 was surprised when CNA 1 and a rehabilitation personnel (RP) assisted him up to a shower chair from his bed and was brought to the shower room.</p> <p>A phone interview was conducted with CNA 1 on 8/9/23 at 1:30 P.M. CNA 1 stated on 7/31/23 at approximately 7:00 A.M. - 8:00 A.M., Resident 1 informed her, he did not want to have a shower. CNA 1 stated she and RP transferred Resident 1 from his bed to a shower chair and went to the shower room. CNA 1 further stated she should have respected Resident 1 's right to refuse shower.</p> <p>An interview was conducted on 8/9/23 at 1:45 P.M. with licensed nurse (LN 2). LN 2 stated, facility staff should honor resident 's right to refuse shower to maintain their dignity.</p> <p>During an interview on 8/9/23 at 3:07 P.M. with the Director of Nursing (DON), the DON stated residents ' preferences should be respected and honored by the facility staff to preserve residents ' honor and dignity.</p>	F 550	<p><i>How the facility plans to monitor its performance to make sure that solutions are sustained.</i></p> <p>IDT team members to report in stand up regarding any findings related to resident shower preferences to ensure that IDT team members are aware of the preferences and that shower preferences are individually honored.</p> <p>Social Services or designee to conduct random interviews with residents 2x/week x 1 month, then weekly ongoing to ensure that all staff are aware of resident shower preferences and that resident shower preferences are honored.</p> <p>Any negative findings to be reported to the QA committee to ensure facility compliance.</p> <p><i>Individual responsible:</i></p> <p>Social Services</p> <p>Compliance goal: 100%</p> <p><i>Date when corrective action will be completed:</i></p> <p>September 17, 2023</p>		

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F 550	Continued From page 3 A review of the facility ' s policy Residents Rights (undated) indicated, "Rights to self - determination. To reside and receive services with reasonable accommodation by the facility of individual needs and preferences ..."	F 550			

Resident Rights

Policy Statement

Employees shall treat all residents with kindness, respect, and dignity.

Policy Interpretation and Implementation

1. Federal and state laws guarantee certain basic rights to all residents of this facility. These rights include the resident's right to:
 - a. a dignified existence;
 - b. be treated with respect, kindness, and dignity;
 - c. be free from abuse, neglect, misappropriation of property, and exploitation;
 - d. be free from corporal punishment or involuntary seclusion, and physical or chemical restraints not required to treat the resident's symptoms;
 - e. self-determination;
 - f. communication with and access to people and services, both inside and outside the facility;
 - g. exercise his or her rights as a resident of the facility and as a resident or citizen of the United States;
 - h. be supported by the facility in exercising his or her rights;
 - i. exercise his or her rights without interference, coercion, discrimination or reprisal from the facility;
 - j. be informed about his or her rights and responsibilities;
 - k. appoint a legal representative of his or her choice, in accordance with state law;
 - l. revoke the delegation of a legal representative, in accordance with state law;
 - m. exercise rights not delegated to a legal representative;
 - n. have his or her same-sex spouse (if applicable) afforded treatment equal to that of an opposite-sex spouse¹;
 - o. be notified of his or her medical condition and of any changes in his or her condition;
 - p. be informed of, and participate in, his or her care planning and treatment;
 - q. access personal and medical records pertaining to him or herself;
 - r. manage his or her personal funds, or have the facility manage his or her funds (if he or she wishes);
 - s. choose an attending physician and participate in decision-making regarding his or her care;
 - t. privacy and confidentiality;
 - u. voice grievances to the facility, or other agency that hears grievances, without discrimination or reprisal and without fear of discrimination or reprisal;
 - v. have the facility respond to his or her grievances;
 - w. examine survey results;
 - x. communicate with outside agencies (e.g., local, state, or federal officials, state and federal surveyors, state long-term care ombudsman, protection or advocacy organizations, etc.) regarding any matter;
 - y. work or not work;
 - z. perform services for the facility if he or she chooses, or refuse to perform services for the facility;
 - aa. visit and be visited by others from outside the facility;
 - bb. be informed of safety or clinical restriction or limitations of visitation;
 - cc. access to a telephone, mail and email;
 - dd. communicate in person and by mail, email and telephone with privacy;
 - ee. retain and use personal possessions to the maximum extent that space and safety permit;
 - ff. share a room with a spouse, if that is mutually agreeable;
 - gg. share a room with his or her roommate of choice when practicable, both residents live in the same facility and both residents agree;
 - hh. self-administer medication, if the interdisciplinary care planning team determines it is safe;

¹ Marriages that are considered valid in the jurisdiction in which they were celebrated are to be recognized as legal and valid, regardless of the laws that apply where the facility is located.

- ii. refuse a transfer from a distinct part within the institution; and
 - jj. equal access to quality care, regardless of source of payment.
- 2. Copies of our resident rights are posted throughout the facility, and a copy is provided to each employee, provider and contracted staff member. In addition, staff will have appropriate in-service training on resident rights prior to having direct-care responsibilities for residents.
- 3. The unauthorized release, access, or disclosure of resident information is prohibited. All release, access, or disclosure of resident information must be in accordance with current laws governing privacy of information issues. All inquiries concerning the release of resident information should be directed to the HIPAA Compliance Officer.
- 4. Orientation and in-service training programs are conducted quarterly to assist our employees in understanding our residents' rights.
- 5. Inquiries concerning residents' rights should be referred to the Social Services Director.

Resident Self Determination and Participation

Policy Statement

Our facility respects and promotes the right of each resident to exercise his or her autonomy regarding what the resident considers to be important facets of his or her life.

Policy Interpretation and Implementation

1. Each resident is allowed to choose activities, and schedule health care and healthcare providers, that are consistent with his or her interests, values, assessments and plans of care, including:
 - a. daily routine, such as sleeping and waking, eating, exercise and bathing schedules;
 - b. personal care needs, such as bathing methods, grooming styles and dress;
 - c. health care scheduling, such as times of day for therapies and certain treatments;
 - d. providers of healthcare services;
 - e. activities, hobbies and interests; and
 - f. religious affiliation and worship preferences.
 2. In order to facilitate resident choices, the administration and staff:
 - a. inform the residents and family members of the residents' right to self-determination and participation in preferred activities;
 - b. gather information about the residents' personal preferences on initial assessment and periodically thereafter, and document these preferences in the medical record;
 - c. include information gathered about the resident's preferences in the care planning process; and
 - d. document and communicate any medical conditions or limitations that may inhibit or interfere with participation in preferred activities.
 3. Residents are encouraged to make choices about aspects of their lives in the facility, including:
 - a. rooming with the person of their choice, providing both individuals consent to the choice;
 - b. organizing and participating in resident groups;
 - c. interacting with other residents, family and members of the community; and
 - d. participating in community activities inside and outside the facility.
 4. Residents are provided assistance as needed to engage in their preferred activities on a routine basis. For example:
 - a. if the resident enjoys reading, the facility will provide access to books (in large print if needed);
 - b. if the resident enjoys regular exercise, he or she will be assisted in attending exercise classes or given access to open areas for walks; and
 - c. if the resident wants to participate in community activities, the facility will arrange transportation.
 5. Residents are encouraged to interact with members of the community and participate in community activities inside and outside the facility. Examples of accommodations that support community participation include:
 - a. noting the events or activities in which the resident expresses an interest;
 - b. scheduling treatments or therapies so that they do not interfere with activities or events;
 - c. arranging transportation to community events; or
 - d. assisting the resident with planning (tickets, reminders, etc.).
- continues on next page*
6. The administration and staff support the organization of and participation in resident and family groups by:
 - a. providing a private meeting space for the group;

- b. helping the group to make family members and other residents aware of the upcoming meeting times in a timely manner;
- c. respecting that staff, visitors and guests may not attend the resident/family group without invitation;
- d. supporting the right of resident representatives and families to meet with the representatives and families of other residents within the facility; and
- e. appointing a staff member (who is approved by the group) to assist the group and respond to written requests resulting from group meetings.