

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>555667</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>09/02/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>GARDEN PARK CARE CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP <b>12681 HASTER STREET GARDEN GROVE, CA 92840</b>	
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)		
F 0557  <b>Level of harm</b> - Potential for minimal harm  <b>Residents Affected</b> - Some	<p><b>Honor the resident's right to be treated with respect and dignity and to retain and use personal possessions.</b></p> <p>Based on observation, interview, and facility P&amp;P review, the facility failed to ensure the residents' personal belongings were properly labeled and returned to the residents from the laundry services in a timely manner. This had the potential for the residents personal belongings to be lost. Findings: Review of the facility's P&amp;P titled Processing Resident Personal Clothing revised in June 2016 showed all clothing for residents must be labeled in a manner that is both practical and respects the dignity of the resident. A small, permanent tag or label with the resident's name, placed in an inconspicuous place on each article of clothing, is the key. Under the section for Processing Clean Personal Clothing, if clothing is unmarked, do not let it accumulate in the the laundry. All missing clothing grievances must be researched, answered and clothing returned (either found or replaced) within 24 to 48 hours. Laundry staff must bring any unmarked clothing for the day to the nursing stations for identification by the CNAs who are more familiar with the residents and their belongings. On 8/13/20 at 1215 hours, an observation of the laundry room and concurrent interview was conducted with the Laundry Supervisor. There were two three-tiered shelves observed with multiple residents' clothing such as shirts, pants, socks, etc. These personal belongings were unlabeled. The Laundry Supervisor was asked how long the unclaimed and unlabeled residents' clothing had been in the laundry room. The Laundry Supervisor stated they were from a month ago, and he had informed the CNAs to ask the residents if they were missing any clothing or if they recognized and could identify any of the clothing items. The Laundry Supervisor stated it was difficult to tell to whom the clothing belong to because they were unlabeled. On 8/17/20 at 1136 hours, a telephone interview was conducted with Resident A. Resident A expressed a concern regarding not getting her clothes back after they were laundered by the facility staff. Resident A stated she was missing the T-shirt and socks that were taken to the facility's laundry. On 8/17/20 at 1339 hours, a telephone interview was conducted with CNA 2. CNA 2 was asked who was responsible in bringing the residents' clothing to be laundered by the facility. CNA 1 stated every CNA who was assigned to a resident was to responsible for placing the dirty clothing to be washed in the laundry bin, then took it to the laundry room. The CNA assigned to the resident or the resident's family member was responsible for labeling the residents' clothing. CNA 2 stated they mixed the residents' clothing in the laundry bin. On 8/17/20 at 1345 hours, a telephone interview was conducted with the SSD. The SSD verified the above findings and stated there were a lot of unlabeled and unclaimed personal clothing stored in the facility.</p>		
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.