

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 055855	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/29/2020
NAME OF PROVIDER OF SUPPLIER ARDEN POST ACUTE REHAB		STREET ADDRESS, CITY, STATE, ZIP 3400 ALTA ARDEN EXPRESSWAY SACRAMENTO, CA 95825	
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 0584 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to maintain a sanitary environment for one of three sampled residents (Resident 1) when the resident's room smelled of urine and the resident's roommate's bed was soiled with urine and not cleaned and sanitized. This failure resulted in Resident 1 feeling upset and had the increased potential to spread infection. Findings: Resident was re-admitted to the facility on [DATE] with multiple [DIAGNOSES REDACTED]. During a review of Resident 1's Minimum Data Sheet (MDS-an assessment tool) dated 1/22/20 indicated a Brief Interview for Mental Status (BIMS-a memory assessment tool) score of 15 over 15 indicating Resident 1 had no memory deficit. During an observation on 2/13/20, at 12:12 p.m., Resident 1's room had a pungent, offensive odor, and smelled like urine. The bed and the floor close to the door smelled like urine and the floor was noted with spillage of some type of liquid. Both the bed and the floor were not cleaned and sanitized. During an interview on 2/13/20, at 12:14 p.m., Resident 1 stated his room smelled like urine because his roommate spilled urine on the bed and on the floor. Resident 1 further stated that he felt upset, annoyed and 'grossed out' that his room was not cleaned yet. During an interview on 2/13/20, at 12:17 p.m., Licensed Nurse (LN) 1 acknowledged that Resident 1's room smelled of urine and it was not appropriate that the resident's room was not clean. LN 1 stated Resident 1's room, and his roommate's bed should have been cleaned and sanitized. During an interview on 2/13/20, at 12:40 p.m., Certified Nursing Assistant (CNA) 1 stated it was appropriate to sanitize the bed after taking out the soiled linens and informed housekeeping to clean the floor. During an interview on 2/13/20, at 12:50 p.m., CNA 2 stated, (I) should've cleaned the bed (after removing the soiled linen), (It was) part of my job. CNA 2 further stated she didn't inform housekeeping to clean the floor. During an interview on 2/13/20, at 12:55 p.m., the Director of Nursing (DON) stated staff should have cleaned Resident 1's room and his roommate's bed and should have called housekeeping to clean the floor. During a review of the facility's policy and procedure (P&P) titled, Cleaning Schedules, revised April 2006, the P&P indicated, Cleaning .are implemented .to assure that each area of our facility is maintained in a safe, clean, and comfortable manner.		
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.