

PRINTED: 05/07/2019
FORM APPROVED

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA920000087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/17/2018
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NAME OF PROVIDER OR SUPPLIER TARZANA HEALTH AND REHABILITATION CEN	STREET ADDRESS, CITY, STATE, ZIP CODE 5050 REBEDA BLVD TARZANA, CA 91356
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(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)	(X6) COMPLETE DATE
A 000	Initial Comments The following reflects the findings of the California Department of Public Health during a staffing visit: Representing the Department: M.S., Associate Governmental Program Analyst. Welfare and Institutions (W&I) Code section 14128.022 sets forth the Department's authority to conduct audits of direct caregiver nursing services provided to residents of skilled nursing facilities, and to establish procedures for conducting such audits through All Facility Letters (AFLs). W&I Code section 14128.022 is attached hereto and incorporated herein as 'Attachment A.' AFL 11-19, setting forth the audit process and guidelines for facilities is available through the following link: http://www.cdph.ca.gov/certific/facilities/Documents/LNC-AFL-11-19.pdf . Health and Safety Code (HSC), setting forth the requirements for Certified Nurse Assistants is available through the following link: http://www.leginfo.ca.gov/cgi-bin/displaycode?section=hsc&group=01001-02000&file=1337-1338.5	A 000		
A 029	1276.5(a) HSC Section 1276 (a) The department shall adopt regulations setting forth the minimum number of equivalent nursing hours per patient required in skilled nursing and intermediate care facilities, subject to the specific requirements of Section 14110.7 of the Welfare and Institutions Code. However, notwithstanding Section 14110.7 or any other provision of law, commencing January 1, 2000, the minimum number of actual nursing hours per patient required in a skilled nursing facility shall be 3.2 hours, except as provided in Section	A 029	<u>A-029 1276.5(a)</u> <u>HSC Section 1276</u> Immediate Measures & Systemic Changes Since the time of the staffing audit on 7/17/18, the following has been implemented to ensure compliance with staffing requirements: 1. To improve recruitment and retention of direct care staff, the facility has: a. Offered Sign-on bonuses and referral bonuses to all newly hired full time direct care staff (implemented 9/18 and remains in place); b. Negotiated and offered new base starting rate	

Licensing and Certification Division

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

[Signature]

TITLE

Administrator

(X6) DATE

5/16/19

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If continuation sheet 1 of 3

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA020000067	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/17/2018
NAME OF PROVIDER OR SUPPLIER TARZANA HEALTH AND REHABILITATION CEN		STREET ADDRESS, CITY, STATE, ZIP CODE 5650 RESEDA BLVD TARZANA, CA 91358		
(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) COMPLETE DATE
A 029	<p>Continued From page 1</p> <p>1276.9,</p> <p>This Statute is not met as evidenced by: Based on record review and interview, the above nursing facility was found out of compliance with Health and Safety Code 1276.5(a), the requirement for a minimum of 3.2 nursing hours per patient day for 3 out of 24 randomly selected days from March 17, 2018 through June 16, 2018:</p> <p>Findings:</p> <ul style="list-style-type: none"> The total number of actual nursing hours performed by direct caregivers per patient day divided by the average census during the patient day failed to meet 3.2 Nursing Hours per Patient Day per AFL 11-19, Section 2(a-c). <p>Documentation requirements set forth in All Facilities Letter (AFL) 11-19 were not met. In the future, failure to properly complete the CDPH 612 forms (or facility equivalent) will result in a deficiency in addition to a finding of non-compliance with the 3.2 minimum NHPDD requirement for each day that proper documentation is not provided. The following documentation requirements were not met as evidenced by AFL 11-19:</p> <p>Section II. Guidelines, Sub-Section 6: Documentation Facilities will be expected to meet the following documentation requirements no later than 14 days from the date of this All Facilities Letter.</p> <p>(b) Each facility shall maintain current, complete,</p>	A 029	<p>of pay to attract new hires (C.N.A. and Licensed Nurses) (wage increase was effective January 2019);</p> <p>c. Wage increase for direct care staff not already at new wage scale (wage increase was effective January 2019);</p> <p>d. Contacted any previous applicants to inform of the new wage scale (this was done in January 2019);</p> <p>e. Held a job fair to recruit new staff. (held 1/23/19);</p> <p>f. Posted all open direct care positions in the facility and with the union (posted September 2018 and continues);</p>	

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NAME OF PROVIDER OR SUPPLIER TARZANA HEALTH AND REHABILITATION CEN		STREET ADDRESS, CITY, STATE, ZIP CODE 5550 RESEDA BLVD TARZANA, CA 91356										
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A 029	Continued From page 2 and accurate personnel and payroll records for all employees in accordance with Title 22, Section 72533. The facility shall provide the following documentation upon request: 1. Census and NHPPD (CDPH 612 or facility alternative form). <table border="1"> <thead> <tr> <th>DATE</th> <th>NHPPD</th> </tr> </thead> <tbody> <tr> <td>03/29/18</td> <td>3.05</td> </tr> <tr> <td>04/24/18</td> <td>3.10</td> </tr> <tr> <td>04/30/18</td> <td>3.18</td> </tr> </tbody> </table>	DATE	NHPPD	03/29/18	3.05	04/24/18	3.10	04/30/18	3.18	A 029	<p>g. Held meeting with staff to keep them informed of recruiting/retention efforts and solicit their input/suggestions (meeting held (January 2019 and updates provided monthly at All Staff Meetings);</p> <p>h. Ensure that all new applicants/resume submissions are tracked and followed up to maximize hiring pool of direct care staff (implemented 9/18 and remains in place);</p> <p>2. The facility has contracted with several staffing agencies to supplement C.N.A. staffing (contracts signed and began use in January 2019 and continue to contract with new agencies as needed).</p>	
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03/29/18	3.05											
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