

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA070000097	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 02/24/2022
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NAME OF PROVIDER OR SUPPLIER

THE REDWOODS POST-ACUTE

STREET ADDRESS, CITY, STATE, ZIP CODE
**1267 MERIDIAN AVENUE
SAN JOSE, CA 95125**

(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 000	<p>Initial Comments</p> <p>The following reflects the findings of the California Department of Public Health during a staffing audit visit for 24 randomly selected days from 11/29/2020 to 02/28/2021.</p> <p>Representing the Department: P.V., Associate Governmental Program Analyst.</p> <p>Welfare and Institutions (W&I) Code section 14126.022 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). <http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=14126.022.&lawCode=WIC></p> <p>AFL 21-11, setting forth the audit process and guidelines for facilities is available through the following link: <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-11.aspx></p> <p>Health and Safety Code (HSC) 1337-1338.5, sets forth the requirements for Certified Nurse Assistants is available through the following link: <https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?division=2.&chapter=2.&lawCode=HSC&article=9></p> <p>W&I section 14126.022 requires the Department to assess an administrative penalty to a SNF if the Department determines that the SNF fails to meet the DHPPD requirements pursuant to HSC sections 1276.5 or 1276.65. The Department shall assess an administrative penalty to any facility that fails to meet the applicable standard</p>	A 000	<p>A. Facility will review staffing daily based on facility census compared to facility nursing hours. Facility will ensure C.N.A. PPD is at 2.4 based on facility census prior to the day and reviewed daily in morning QA Meeting. If PPD is not a 2.4 ppd, facility will have C.N.A.'s work extra hours to meet NHPPD of 2.4.</p> <p>B. The Administrator and Director of Nursing or designee will ensure PPD is at 2.4 by reviewing the NHPPD in the facility software tracking system. The Staffing Coordinator will report to them daily regarding NHPPD in the morning QA meeting. Any noncompliance will be immediately QAPI'd. Facility has already begun this process. Facility is currently in compliance.</p> <p>C. Corrective actions shall be completed by November 10th. Any non-compliance will be QAPI'd and discussed in the facility Quality Assurance Committee.</p>	

Licensing and Certification Division
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

4Y3S11

If continuation sheet 1 of 4

Administrator

10/20/22

[Signature]

California Department of Public Health

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A 000	<p>Continued From page 1</p> <p>for staffing requirements on any given day. The applicable standard is 3.5 DHPPD and 2.4 DHPPD (CNA), unless an approved Workforce Shortage, Patient Needs, or COVID-19 Waiver is granted.</p> <p>The statute was not met as evidenced by the following findings:</p> <p>Final Audit Result:</p> <p>Total Distinct Non-Compliant Day(s) = 10</p> <table border="1"> <thead> <tr> <th>Date</th> <th>3.5</th> <th>2.4</th> </tr> </thead> <tbody> <tr><td>12/02/2020</td><td>3.90</td><td>*2.03*</td></tr> <tr><td>12/03/2020</td><td>4.26</td><td>*2.35*</td></tr> <tr><td>12/09/2020</td><td>3.64</td><td>*1.76*</td></tr> <tr><td>12/16/2020</td><td>4.16</td><td>2.44</td></tr> <tr><td>12/17/2020</td><td>4.56</td><td>2.58</td></tr> <tr><td>12/18/2020</td><td>5.21</td><td>2.85</td></tr> <tr><td>12/19/2020</td><td>3.63</td><td>*1.82*</td></tr> <tr><td>12/23/2020</td><td>5.03</td><td>2.62</td></tr> <tr><td>12/26/2020</td><td>3.61</td><td>*2.14*</td></tr> <tr><td>01/01/2021</td><td>3.77</td><td>*2.38*</td></tr> <tr><td>01/05/2021</td><td>4.13</td><td>2.50</td></tr> <tr><td>01/07/2021</td><td>4.09</td><td>2.56</td></tr> <tr><td>01/22/2021</td><td>4.10</td><td>2.48</td></tr> <tr><td>01/26/2021</td><td>3.72</td><td>*2.31*</td></tr> <tr><td>01/30/2021</td><td>3.60</td><td>2.54</td></tr> <tr><td>02/01/2021</td><td>3.95</td><td>*2.34*</td></tr> <tr><td>02/04/2021</td><td>3.94</td><td>2.41</td></tr> <tr><td>02/12/2021</td><td>3.92</td><td>*2.28*</td></tr> <tr><td>02/16/2021</td><td>3.80</td><td>2.44</td></tr> <tr><td>02/20/2021</td><td>3.65</td><td>2.46</td></tr> <tr><td>02/23/2021</td><td>3.92</td><td>*2.35*</td></tr> <tr><td>02/24/2021</td><td>4.00</td><td>2.48</td></tr> <tr><td>02/26/2021</td><td>3.79</td><td>2.52</td></tr> <tr><td>02/27/2021</td><td>3.61</td><td>2.52</td></tr> </tbody> </table> <p>*x.xx* = non-compliant date</p>	Date	3.5	2.4	12/02/2020	3.90	*2.03*	12/03/2020	4.26	*2.35*	12/09/2020	3.64	*1.76*	12/16/2020	4.16	2.44	12/17/2020	4.56	2.58	12/18/2020	5.21	2.85	12/19/2020	3.63	*1.82*	12/23/2020	5.03	2.62	12/26/2020	3.61	*2.14*	01/01/2021	3.77	*2.38*	01/05/2021	4.13	2.50	01/07/2021	4.09	2.56	01/22/2021	4.10	2.48	01/26/2021	3.72	*2.31*	01/30/2021	3.60	2.54	02/01/2021	3.95	*2.34*	02/04/2021	3.94	2.41	02/12/2021	3.92	*2.28*	02/16/2021	3.80	2.44	02/20/2021	3.65	2.46	02/23/2021	3.92	*2.35*	02/24/2021	4.00	2.48	02/26/2021	3.79	2.52	02/27/2021	3.61	2.52	A 000		
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A 205	Continued From page 2	A 205		
A 205	<p>HSC 1276.65(c)(1)(C) SAS - 2.4 Standard</p> <p>(C) Skilled nursing facilities shall have a minimum of 2.4 hours per patient day for certified nurse assistants in order to meet the requirements in subparagraph (B).</p> <p>This Statute is not met as evidenced by: Facility Failed to meet 2.4 Direct Care Service Hours Per Patient Day (DHPPD) performed by certified nurse assistants, pursuant to HSC 1276.65(c)(1)(C) for 10 out of 24 days.</p> <p>Per HSC, section 1337.2 (f) " ...It shall be unlawful for any person not certified under this article to hold himself or herself out to be a certified nurse assistant. " CDPH found staff with lapsed, suspended, expired or revoked certifications. This necessitated excluding all service hours for such employees.</p> <p>Facility failed to replace staff that did not work as scheduled, and/or did not schedule to meet the minimum staffing requirements.</p> <p>Review of Form 280A (Facility: Nurse Assistant Training Program Notice) states " Hire CNA Only, " therefore, the nurse assistant(s) do not count towards the 3.5 DHPPD per HSC, section 1337.1(b)(6).</p> <p>The total number of actual direct care nursing</p>	A 205		

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A 205	Continued From page 3 hours performed by direct caregivers per patient day divided by the average census during the patient day failed to meet DHPPD Staffing Standard(s).	A 205		