

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA020000276	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/07/2021
NAME OF PROVIDER OR SUPPLIER REDWOOD CONVALESCENT HOSPITAL, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 22103 REDWOOD ROAD CASTRO VALLEY, CA 94546		
(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 10/01/2020 to 12/31/2020.</p> <p>Representing the Department: B.T., 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>Preparation and execution of this Plan of Correction (P.O.C.) do not constitute an admission of the Provider of the validity of the facts alleged nor conclusions outlined in the Statement of Deficiencies. This P.O.C. is being executed to comply with the provisions mandated by California Health and Safety Code sections 1280 & 42 CRF483.</p> <p>A200 – HSC 1276.6(c)(1)(B) SAS – 3.5 Standard A205 – HSC 1276.65(c)(1)(C) SAS – 2.4 Standard</p> <p>What immediate measures and systemic changes will be put into place to ensure that the deficient practice does not recur?</p> <p><i>The facility has redoubled its efforts to fill staffing needs under the staffing requirement regulation through intensive recruiting, use of registries, and training of interested and recommended individuals to become Certified Nursing Assistants (CNAs), requesting staff to go overtime, and</i></p>	

Licensing and Certification Division

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

TITLE

(X6) DATE

STATE FORM

6859

9/EM11

If continuation sheet 1 of 4

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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) = 24</p> <table border="1"> <thead> <tr> <th>Date</th> <th>3.5</th> <th>2.4</th> </tr> </thead> <tbody> <tr><td>10/05/2020</td><td>*3.39*</td><td>*1.99*</td></tr> <tr><td>10/12/2020</td><td>3.56</td><td>*2.06*</td></tr> <tr><td>10/18/2020</td><td>*3.43*</td><td>*2.20*</td></tr> <tr><td>10/19/2020</td><td>*3.34*</td><td>*2.02*</td></tr> <tr><td>10/23/2020</td><td>3.81</td><td>*2.31*</td></tr> <tr><td>10/28/2020</td><td>3.83</td><td>*2.33*</td></tr> <tr><td>10/29/2020</td><td>3.51</td><td>*2.01*</td></tr> <tr><td>10/30/2020</td><td>3.70</td><td>*2.38*</td></tr> <tr><td>11/05/2020</td><td>3.64</td><td>*2.07*</td></tr> <tr><td>11/11/2020</td><td>3.54</td><td>*2.21*</td></tr> <tr><td>11/12/2020</td><td>3.52</td><td>*2.07*</td></tr> <tr><td>11/13/2020</td><td>*3.19*</td><td>*1.94*</td></tr> <tr><td>11/15/2020</td><td>3.54</td><td>*2.11*</td></tr> <tr><td>11/24/2020</td><td>*3.47*</td><td>*2.09*</td></tr> <tr><td>11/26/2020</td><td>3.59</td><td>*1.77*</td></tr> <tr><td>11/29/2020</td><td>3.65</td><td>*2.23*</td></tr> <tr><td>12/01/2020</td><td>3.70</td><td>*2.12*</td></tr> <tr><td>12/02/2020</td><td>*3.46*</td><td>*2.14*</td></tr> <tr><td>12/04/2020</td><td>3.62</td><td>*2.04*</td></tr> <tr><td>12/17/2020</td><td>3.58</td><td>*2.11*</td></tr> <tr><td>12/19/2020</td><td>*3.41*</td><td>*2.23*</td></tr> <tr><td>12/21/2020</td><td>*3.49*</td><td>*2.13*</td></tr> <tr><td>12/24/2020</td><td>*3.29*</td><td>*1.93*</td></tr> <tr><td>12/26/2020</td><td>*3.28*</td><td>*2.09*</td></tr> </tbody> </table> <p>*x.xx* = non-compliant date</p>	Date	3.5	2.4	10/05/2020	*3.39*	*1.99*	10/12/2020	3.56	*2.06*	10/18/2020	*3.43*	*2.20*	10/19/2020	*3.34*	*2.02*	10/23/2020	3.81	*2.31*	10/28/2020	3.83	*2.33*	10/29/2020	3.51	*2.01*	10/30/2020	3.70	*2.38*	11/05/2020	3.64	*2.07*	11/11/2020	3.54	*2.21*	11/12/2020	3.52	*2.07*	11/13/2020	*3.19*	*1.94*	11/15/2020	3.54	*2.11*	11/24/2020	*3.47*	*2.09*	11/26/2020	3.59	*1.77*	11/29/2020	3.65	*2.23*	12/01/2020	3.70	*2.12*	12/02/2020	*3.46*	*2.14*	12/04/2020	3.62	*2.04*	12/17/2020	3.58	*2.11*	12/19/2020	*3.41*	*2.23*	12/21/2020	*3.49*	*2.13*	12/24/2020	*3.29*	*1.93*	12/26/2020	*3.28*	*2.09*	A 000	<p><i>not accepting additional patients from hospitals and through referrals.</i></p> <p><i>These efforts have also helped, but there are days when no staff can be placed because they were exhausted and sick, especially during the height of the COVID-19 infection, when they had to stay in their homes to avoid infecting others. Other than these, others had personal reasons for not reporting to their jobs.</i></p> <p><i>Our facility also submitted a Staffing Waiver, but it was not approved for some reason.</i></p> <p>A description of the monitoring process and positions of persons responsible for monitoring (i.e., Administrator, Director of Nursing, or other responsible supervisory personnel) as well as how the facility plans to monitor its performance to ensure corrections are achieved and sustained.</p> <p><i>The Director of Nursing (DON) in charge of Staffing, the Administrator, the Nursing Supervisor, and other staff</i></p>	
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A 200	Continued From page 2	A 200	<i>members helped fill the staffing requirement ratio (2.4 & 3.5), which was monitored daily to remedy and satisfy staffing needs. However, these efforts were ineffective at times due to the previously mentioned reasons.</i>	
A 200	HSC 1276.65(c)(1)(B) SAS - 3.5 Standard (B) Effective July 1, 2018, skilled nursing facilities, except those skilled nursing facilities that are a distinct part of a general acute care facility or a state-owned hospital or developmental center, shall have a minimum number of direct care services hours of 3.5 per patient day, except as set forth in Section 1276.9. This Statute is not met as evidenced by: Facility failed to meet 3:5 Direct Care Service Hours Per Patient Day (DHPPD), Pursuant to HSC 1276.65(c)(1)(B) for 10 of 24 days. The total number of actual direct care nursing 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 200	<i>Due to the ongoing staffing problem and declining census, the facility was acquired by (Linkshealth) in the belief that they will fill the shortfall, especially regarding the ratio requirement in Staffing.</i> <i>The undersigned believes that the POC no longer applies to the previous administration because the facility is now under the new management of a new entity, Linkshealth, which began operating on May 1, 2023.</i>	
A 205	HSC 1276.65(c)(1)(C) SAS - 2.4 Standard (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). 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 24 out of 24 days.	A 205	Dates when corrective action was completed: <i>Not Applicable. Redwood Convalescent Hospital has been acquired by Linkshealth on May 1, 2023.</i>	

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