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4 ann California Department of Public Health STATEMENT OF DEFICIENCIES (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION COMPLETED IDENTIFICATION NUMBER: A. BUILDING B. WING CA070000086 05/06/2011 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 3580 PAYNE AVENUE SAN TOMAS CONVALESCENT HOSPITAL SAN JOSE, CA 95117 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) IO 10 (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) Preparation and/or execution of this A 000 A 000 Initial Comments Plan of Correction does not constitute The following reflects the findings of the California admisssion or agreement by the provider Department of Public Health during the to the truth of the facts alleged or investigation of an entity reported incident conclusions set forth on this Statement conducted on 5/6/11. of Deficiencies. This Plan of correction is prepared/and For Entity Reported Incident CA00268286 or executed solely because of the regarding Quality of Care/Treatment, the Department was not able to substantiate a provisions of Health and Safety Code violation of State or Faderal regulation. However, Section 1280 and 42 CFR 483 et seq. an unrolated State deficiency was identified (see require it. California Code of Regulations, Title 22, Section This Plan of correction constitutes our 72533(a)(1)(l). credible allegation of compliance. Inspection was limited to the specific entity reported incident and does not represent the findings of a full inspection of the facility. A. What Corrective Action will be accomplished for the patient Representing the California Department of Public idenified to have been affected by Health: 29766, Health Facilities Evaluator Nurse. the deficient practice: A 944 A 944 T22 DIV5 CH3 ART5-72533(a)(1) Employee - The Licensed Nurse and Personnel Records Director of Staff Development (a) Each facility shall maintain current complete evaluated performance for and accurate personnel records for all C.N.A A and C.N.A B on employees. May 12, 2011. (1) The record shall include: This Statute is not mot as evidenced by: A 963 T22 DIV5 CH3 ART5-72533(a)(1)(I) Employee A 953 Personnel Records (a) Each facility shall maintain current complete and accurate personnel records for all employees.

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NAME OF F	NOW DECOME	CA070000086	ereser au	APEGG OF	CTATE 7/0 (*) DE	05/0	6/2011	
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(X4) IC PREFIX TAG	(EACH DEFICIENC	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST RE PRECEUED BY FULL REGULATORY OR LIST IDENTIFYING INFORMATION)			PROVIDER'S PLAN OF COR (EACH CORRECTIVE ACTION) CROSS-REFERENCED TO THE A DEFICIENCY)	SHOULD BE COMPLETE		
A 953	Continued From page 1 (1) The record shall include: (I) Performance evaluations.			A 953	B. How other patients having the potential to be affected by the same deficient practice be identified, and what corrective action will be taken: The Administrator in- serviced department heads on 5/9/11 regarding facility policy and procedure for performance evaluations to their respective staff. The Department heads reviewed their respective staff and completed performance evaluation starting 5/9/2011 and on going.			
	This Statute is not met as evidenced by: Based on interview and record review, the facility failed to maintain current annual performance evaluations in the personnel file for two of two sampled staff (A and 6). Findings: During record review on 5/6/11, certified nurse assistant A's (CNA A) date of hire was 11/9/98. The last annual performance evaluation in the personnel record was dated 11/2002. During record review on 5/6/11, CNA B's date of hire was 10/08/09. No performance evaluation was provided in the personnel file since the nire							
	During an interview on 5/6/11 at 3:15 p.m., the director of staff development (DSD) stated a performance evaluation was done annually for all nursing staff. Upon review of the two sampled personnel files, the DSD stated there was no annual performance evaluation for CNA A since 2002 and no performance evaluation for CNA B since her hire date. During an interview on 5/6/11 at 4:10 p.m., the assistant director of nursing (ADON) stated performance evaluations of all employees were done annually and kept in the personnel file. A review of the DSD's job description dated 10/15/08, fisted essential functions including observation and evaluation of CNAs while on the job to judge efficiency of procedures and to train employees to improve skills.				C. What immediate measurand systemic changes with the deficient practice does the deficient practice does all employees to track a performance evaluations will alert respective department head on a monthly basis. This also includes new hith the Director of Staff Development department head new hire requiring 90 day performance evaluation.	will re that es not recur; ment "for normal eand extment ire, elooment dis for		

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