

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/21/2019  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  555318	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  C 06/19/2019
NAME OF PROVIDER OR SUPPLIER  VILLA RANCHO BERNARDO CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 15720 BERNARDO CENTER DRIVE SAN DIEGO, CA 92127		
(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) COMPLETION DATE	
F 000	INITIAL COMMENTS  The following reflects the findings of the State of California Department of Public Health during an abbreviated standard survey for the investigation of one complaint.  Complaint number CA00552217  Representing the California Department of Public Health: Health Facilities Evaluator Nurse 37568.  The inspection was limited to the specific reported incident and does not reflect the findings of a full inspection of the facility.  There was one deficiency issued for complaint CA00552217.	F 000	<p style="text-align: center;"><b>RECEIVED</b> <b>CA DEPT OF PUBLIC HEALTH</b></p> <p style="text-align: center;"><b>JUN 27 2019</b></p> <p style="text-align: center;"><b>LICENSING &amp; CERTIFICATION</b> <b>SAN DIEGO DISTRICT OFFICE</b></p>		
F 205 SS=D	NOTICE OF BED-HOLD POLICY BEFORE/UPON TRANSFER CFR(s): 483.15(d)(1)(i)-(iv)(2)  (d) Notice of bed-hold policy and return-  (1) Notice before transfer. Before a nursing facility transfers a resident to a hospital or the resident goes on therapeutic leave, the nursing facility must provide written information to the resident or resident representative that specifies-  (i) The duration of the state bed-hold policy, if any, during which the resident is permitted to return and resume residence in the nursing facility;  (ii) The reserve bed payment policy in the state plan, under § 447.40 of this chapter, if any;  (iii) The nursing facility's policies regarding	F 205			

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

TITLE

(X6) DATE



Administrator

6/25/19

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.

OK 6/27/19

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F 205	<p>Continued From page 1</p> <p>bed-hold periods, which must be consistent with paragraph (c)(5) of this section, permitting a resident to return; and</p> <p>(iv) The information specified in paragraph (c)(5) of this section.</p> <p>(2) Bed-hold notice upon transfer. At the time of transfer of a resident for hospitalization or therapeutic leave, a nursing facility must provide to the resident and the resident representative written notice which specifies the duration of the bed-hold policy described in paragraph (e)(1) of this section.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to provide a bed hold notice to a resident who was transferred to a hospital for one of three sampled residents. (1)</p> <p>This failure had the potential for Resident 1 to not be aware of her right to return to the facility.</p> <p>Findings:</p> <p>Resident 1 was admitted to the Skilled Nursing Facility on 2/17/17.</p> <p>On 9/13/17 at 9:30 A.M., an interview was conducted with Resident 1's Responsible Party (RP). The RP stated the facility did not hold Resident 1's bed when Resident 1 was transferred to the hospital. The RP stated when Resident 1 attempted to return to the facility, the nurses told Resident 1 she no longer had a bed in the facility and they had packed her belongings.</p> <p>On 9/14/17 at 12:55 P.M., an interview was</p>	F 205	<p># 3 The administrator and DON in-serviced Licensed Nurses and IDT on May 28, 31, June 5, 15, 25, and 26 2019 regarding facility's Bed-Hold P &amp; P and accurate completion of the Bed-Hold Form.</p> <p>#4 Facility will monitor compliance by random daily audits 5 x weekly of admission and discharges to the acute hospital by the Medical Records Director and or designee for 3 months and or until 100 % threshold is met. Results from the random audits will be reviewed in the monthly QAPI meeting. The QAPI Team will then evaluate, trend and analyze significant data to ensure sustainability of the plan of action.</p> <p>#5 Administrator and DON will oversee compliance.</p> <p>#6 Date of completion – July 7, 2019</p>		

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F 205	<p>Continued From page 2</p> <p>conducted with Resident 1's primary physician (MD). The MD stated he wrote an order for Resident 1 to be transferred to the hospital and the LN's should have taken care of the bed hold paperwork.</p> <p>On 9/21/17 at 1:30 P.M., an interview and record review was conducted with the facility's social worker (SW). The SW stated the facility did not anticipate Resident 1 would return to the facility after being transferred to the hospital and therefore did not provide a bed hold to Resident 1. The SW stated the bed hold forms had not been signed by the Resident or the RP.</p> <p>On 9/21/17 Resident 1's clinical record was reviewed. The facility's document titled Notice of Proposed Transfer/Discharge, dated June 2008, was not signed by Resident 1 or the RP.</p> <p>On 9/21/17 at 10:10 A.M., an interview was conducted with LN 2. LN 2 stated on 8/30/17, Resident 1 was discharged from the facility in the morning and Resident 1 returned back to the facility later in the afternoon. LN 2 stated Resident 1's RP was not allowed to move Resident 1 back into her room on 8/30/17. LN 2 stated the nurses had placed Resident 1's belongings in boxes when Resident 1 was transferred to the hospital. LN 2 stated Resident 1's bed was not held. LN 2 stated she had not provided a written notice for a bed hold to the Resident or RP when Resident 1 was transferred to the hospital on 8/30/17.</p> <p>On 12/18/17 at 10:07 A.M., an interview was conducted with LN 3. LN 3 stated the LN's who cared for Resident 1 had known about the planned hospital stay and should have provided</p>	F 205			

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F 205	Continued From page 3 Resident 1 or the RP with information about a bed hold.  Per the facility's policy entitled Bed Holds, dated June 2008, the resident and/or legal representative will be given written notice of the facility's bed hold policy, including the bed hold's duration,...on admission to the facility and at the time of transfer to the acute hospital.	F 205			