

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

PRINTED: 01/15/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055956	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 01/07/2021
NAME OF PROVIDER OR SUPPLIER BRIARWOOD POST ACUTE			STREET ADDRESS, CITY, STATE, ZIP CODE 5901 LEMON HILL AVE SACRAMENTO, CA 95824		
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F 000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health during an abbreviated survey for the investigation of complaint #CA00699329. Representing the Department of Public Health: Health Facilities Evaluator Nurse, 38528 The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility. F 625 Notice of Bed Hold Policy Before/Upon Trnsfr SS=D CFR(s): 483.15(d)(1)(2) §483.15(d) Notice of bed-hold policy and return- §483.15(d)(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 bed-hold periods, which must be consistent with paragraph (e)(1) of this section, permitting a resident to return; and (iv) The information specified in paragraph (e)(1) of this section. §483.15(d)(2) Bed-hold notice upon transfer. At the time of transfer of a resident for	F 000	F 000 Briarwood Post Acute shares the state's focus on the health, safety and well-being of facility residents. The statements made on this plan of correction are not an admission to and do not constitute an agreement with the alleged deficiencies herein. To remain in compliance with all federal and state regulations the facility has taken and will take actions set forth in the Plan of Correction. The Plan of Correction constitutes the facility's allegation of compliance such that the deficiencies cited have been corrected by the date certain. Although the facility does not agree with some of the findings and conclusions of the surveyors, we have implemented a plan of correction to demonstrate our continuing effort to provide quality care to our residents as well as maintaining its cleanliness and infection control Health Care Facility.		

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

TITLE

(X6) DATE

[Signature] **ESPERITO CAGANIRA JR.** **ADMINISTRATOR** **1-28-2021**

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.

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F 625	<p>Continued From page 1</p> <p>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 (d)(1) of this section. This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and document review, the facility failed to ensure a written notice of bed-hold or notice of discharge was provided to one of three sampled residents (Resident 1), and/or the resident's responsible party (RP), when Resident 1 was transferred to the hospital.</p> <p>This failure contributed to Resident 1 being uninformed of his right to return to the facility.</p> <p>Findings:</p> <p>Resident 1 was admitted to the facility in early 2020 and was discharged in the middle of 2020 with diagnoses which included memory impairment.</p> <p>A review of Resident 1's Minimum Data Set (MDS, an assessment tool), dated 6/28/20, indicated Resident 1 had moderate memory impairment.</p> <p>A review of Resident 1's Bed-Hold Notice, dated 7/27/20, indicated notification was not completed.</p> <p>A review of Resident 1's Notice of Proposed Transfer/Discharge, dated 7/27/20, indicated no resident or responsible party signatures, and no indicated reason for the transfer or discharge.</p> <p>A review of Resident 1's Physician's Orders, dated 7/1/20 - 7/31/20, indicated, "Resident [1]</p>	F 625	<p><u>F625 - Notice of bed hold policy and return</u></p> <p><u>Corrective Action Initiated for Resident/s</u></p> <p>Resident #1 was discharged on 7/27/2020 with incomplete bed hold notice.</p> <p><u>How Potential Other Residents Were Identified and Corrective Action Taken.</u></p> <p>Medical Records will complete an audit of residents transferred to outside hospital for timely and complete bed hold notice. Bed Holds will be completed on time of Discharge /Transfer to outside hospital. DNS will assure completion. Social Services will follow up on notification of ombudsman when a resident is transferred or discharged to outside hospital.</p> <p><u>Measure/Systemic Changes Initiated to Prevent Future Recurrence.</u></p> <p>The DNS reviewed bed hold policy with nursing staff regarding completion and communication to responsible party regarding transfer and bed hold policy.</p>		

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F 625	<p>Continued From page 2</p> <p>has capacity to understand, sign consents and make health care decisions."</p> <p>In an interview on 8/17/20 at 10:31 a.m., the Complainant indicated he evaluated Resident 1 at the hospital, and stated, "I wrote a discharge order...I called the facility several times and they told me they cannot re-admit the resident because they cannot take care of him."</p> <p>In an interview on 8/17/20 at 11:21 a.m., when the Administrator (ADM) was asked how the facility discharge process was, the ADM stated, "We do put them on seven day bed-hold to make sure that they can come back...should be filled out and given to residents or responsible party."</p> <p>In an interview on 8/17/20 at 12:38 p.m., when the Director of Staff Development (DSD) was asked if she had found a bed-hold and notice of discharge for Resident 1, she stated, "I did not find a Bed-Hold Notice or a Notification for Transfer or Discharge in the resident's chart."</p> <p>In an interview on 8/20/20 at 10:23 a.m., when asked if the bed-hold notice or notification of discharge notice were given or mailed to Resident 1, his RP or the Ombudsman, the Director of Nursing (DON) stated, "I'm not sure. I have to check." No documented evidence indicated the bed-hold notice or the notice of discharge notice was mailed to the Resident 1.</p> <p>In an interview on 8/20/20 at 10:43 a.m., the DON indicated and confirmed the bed-hold notice and the notice of transfer and discharge provided by the facility was signed by the nurse, and there was no indication the notices were mailed to Resident 1 or the Ombudsman.</p>	F 625	<p><u>Monitoring Plans to Ensure Solutions Are Achieved and Integrated into CQI System.</u></p> <p>The MRD will conduct daily audits of bed hold notifications and communication to responsible party Findings will be reported to the Administrator and DNS for appropriate corrective actions.</p> <p>MRD will conduct daily discharge audits to review notification of Ombudsman to ensure notification of ombudsman of transfer/discharge within 24 hours of transfer/discharge. Findings will be reported to the Administrator and DNS for appropriate corrective actions.</p> <p>The SSD will provide a summary of the findings to the facility's monthly CQI committee for further review and recommendations.</p> <p><u>Compliance Date: 2/28/21</u></p>		

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F 625	Continued From page 3 In an interview on 8/20/20 at 2:20 p.m., when asked if there were available beds for Resident 1, the DON stated, "There were available beds for the resident." In an interview on 8/27/20 at 2:24 p.m., the Ombudsman stated, "I have not received any Notification of Transfer or Discharge from the facility." A review of the facility policy and procedure titled, "Bed Holds," revised 2/17, indicated "Prior to transfers and therapeutic leaves, residents or resident representatives will be informed in writing of the bed-hold and return policy." A review of facility's Policy and Procedure titled, "Readmission to the Facility", dated December 2008, indicated, "A Medicaid resident whose hospitalization or therapeutic leave exceeds the bed hold period allowed by the state will be readmitted to the facility upon the first availability of a bed in a semi-private room if the resident: a) Requires the services provided by the facility, b) Was not discharged for any reason outlined in our 'Notice of a Transfer and/or Discharge' policy..." F 626 SS-B Permitting Residents to Return to Facility CFR(s): 483.15(e)(1)(2) §483.15(e)(1) Permitting residents to return to facility. A facility must establish and follow a written policy on permitting residents to return to the facility after they are hospitalized or placed on therapeutic leave. The policy must provide for the following. (i) A resident, whose hospitalization or therapeutic	F 625			
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F 626	<p>Continued From page 4</p> <p>leave exceeds the bed-hold period under the State plan, returns to the facility to their previous room if available or immediately upon the first availability of a bed in a semi-private room if the resident-</p> <p>(A) Requires the services provided by the facility; and</p> <p>(B) Is eligible for Medicare skilled nursing facility services or Medicaid nursing facility services.</p> <p>(ii) If the facility that determines that a resident who was transferred with an expectation of returning to the facility, cannot return to the facility, the facility must comply with the requirements of paragraph (c) as they apply to discharges.</p> <p>§483.15(e)(2) Readmission to a composite distinct part. When the facility to which a resident returns is a composite distinct part (as defined in §483.5), the resident must be permitted to return to an available bed in the particular location of the composite distinct part in which he or she resided previously. If a bed is not available in that location at the time of return, the resident must be given the option to return to that location upon the first availability of a bed there.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and document review, the facility failed to permit one of three sampled residents (Resident 1) to return to the facility after hospital discharge.</p> <p>This failure increased the potential to affect Resident 1's safety.</p> <p>Findings:</p>	F 626	<p><u>F 626- Resident to return to facility</u></p> <p>The Facility was in care of the resident when he became very agitated and aggressive. Resident states he was going to attempt to take his life and called his daughter to say good bye. Nursing staff placed him on q15 minute checks. During a period of 15 minutes' resident took a razor and paperclip and attempted to cut his wrist. First aid was provided and resident was sent to Acute. Residents was to be sent to Methodist where his records state his medical history. Resident re-directed transport to VA medical center where his history of current behaviors and cognitive status were documented. Resident was not safe to come back to the facility as he had made multiple statements and attempts to leave and ultimately to end his life. VA ultimately gave him his capacity and deemed him self-responsible allowing him to discharge home in a taxi cab.</p>		

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F 626	<p>Continued From page 5</p> <p>Resident 1 was admitted to the facility in early 2020 and discharged the middle of 2020 with diagnoses which included memory impairment.</p> <p>A review of Resident 1's Care Plan, dated 6/12/20, indicated "At risk for self-care deficit due to memory loss."</p> <p>A review of Resident 1's Minimum Data Set (MDS, an assessment tool), dated 6/23/20, indicated Resident 1 had moderate memory impairment, mood and anxiety problems, and required supervision with activities of daily living (ADLs).</p> <p>A review of Resident 1's Physician's Orders, dated 7/31/20, indicated "Resident [1] has capacity to understand, sign consents and make health care decisions."</p> <p>In interview on 8/17/20 at 10:11 a.m., the Complainant indicated he evaluated Resident 1 at the hospital, and stated, "I wrote a discharge order...I called the facility several times and they told me they cannot re-admit the resident because they cannot take care of him. I explained to them the resident is safe to go back to facility but they insisted the facility will not take him back.. He is living alone and he is not safe alone in his house. I wanted the facility to take him back for his safety but they do not want to take him back.."</p> <p>In an interview on 8/17/20 at 11:21 a.m., when the Administrator (ADM) was asked the facility discharge process, the ADM stated, "We do put them on seven day bed hold to make sure that they can come back...should be filled out and given to residents or responsible party. Refusal</p>	F 626			

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FORM CMS-2567(02-98) Previous Versions Obsolete Event ID: 022511 Facility ID: CA030000091 If continuation sheet Page 9 of 9

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F 626	Continued From page 7 In an interview on 8/17/20 at 12:58 p.m., CNA 1 stated, "[Resident 1] was a bit of confused... He does not bother anyone. He was very calm. He does not hurt anybody, staff or other residents. If the resident came back to the facility, he is okay to take care of and very manageable because he listens." In an interview on 8/19/20 at 9:30 a.m., the Complainant indicated Resident 1 was discharged from the hospital, and stated, "We cleared him for discharge...The facility refused to re-admit him after so many calls...I'm worried with his safety. He lives alone and his sisters are out of state...He is not safe living alone because of his dementia." In an interview on 8/20/20 at 10:48 a.m., when asked if there was any attempt to assess Resident 1 when he was ready to return, the DON stated, "Nobody from the facility went to assess the resident if he was safe to come back..." In an interview on 8/20/20 at 2:20 p.m. when asked if there were available beds for Resident 1, the DON stated, "There were available beds for the resident." A review of the facility's Policy and Procedure titled, "Bed-Holds and Returns," dated 3/17, indicated "The resident will be permitted to return to an available bed in the location of the facility that he or she previously resided. If there is not an available bed in that part, the resident will be given the option to take an available bed in another distinct part of the facility and return to the previous distinct part when a bed becomes available."	F 626			

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F 626	Continued From page 6 for re-admission would be if they have something that we can't handle, care issues, mental disability, diagnoses that we can't handle." In an interview on 8/17/20 at 11:33 a.m., the Director of Marketing (DM) stated, "[Resident 1] was sent to the hospital. He is alert and oriented...I got a call from the hospital physician that he was discharged and was ready to come back." In an interview on 8/17/20 at 12:01 p.m., the ADM stated, "We have tried to place [Resident 1]. When he was alert and verbalized a plan to harm himself, we did not execute any...I didn't think that he was appropriate to come back here. The MD [medical doctor] called back days later telling that he was ready to come back." In an interview on 8/17/20 at 12:19 p.m., Licensed Nurse 1 (LN 1) "I have taken care of [Resident 1] since admission...We had to send him out. He was calm..." In an interview on 8/17/20 at 12:24 p.m., LN 1 stated, "There were times when he comes to tell me he didn't have dementia...He does not hurt any other residents or staff. He is just depressed...If he comes back to the facility, I would be able to take care of him and manage him. I don't have any problem with him...The doctor from [the hospital] had been calling for him to come back." In an interview on 8/17/20 at 12:44 p.m., Certified Nursing Assistant 1 (CNA 1) indicated Resident 1 was upset after talking to his daughter on the phone, and stated "[Resident 1] did not want to go to the hospital..."	F 626			