



Good Samaritan Rehabilitation & Care Center
Commitment to Quality Care

1630 N. Edison St. Stockton, CA 95204 ♦ Tel: (209) 948-8762 ♦ Fax: (209) 948-1629

October 31, 2024

California Department of Public Health

Center for Health Care Quality,
Stockton District Office
3121 West March Lane,
Suite 150
Stockton, CA 95219

Dear Ms. Afshan Ali, HFES

Reference CA00916585

Attached are plans of correction to the deficiencies identified on an abbreviated survey on October 10th 2024. The plan of correction is an allegation of compliance to F698.

Sincerely,

Willy De Mesa
Alternate Administrator

PRINTED: 10/17/2024
FORM APPROVED
OMB NO. 0938-0391

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X8) DATE _____

[Signature] *Director* *10-31-24*

If continuation sheet Page 1 of 5

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

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OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055039	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 10/10/2024
NAME OF PROVIDER OR SUPPLIER GOOD SAMARITAN REHAB AND CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1630 N. EDISON STREET STOCKTON, CA 95204		
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F 698	<p>Continued From page 1 record.</p> <p>The failure of unavailable transportation led to a delay in dialysis care for Resident 1 with a potential to alter Resident 1's health status. The failure to include Resident 1's labs in his medical record had the potential for a lapse in Resident 1's care between the facility and the dialysis center.</p> <p>Findings:</p> <p>1. A review of Resident 1's Admission Record indicated Resident 1 was admitted to the facility in 2022 with diagnoses that included hypertension, end stage renal disease (chronic disease where the kidneys are permanently damaged and can no longer function) and dependence on dialysis.</p> <p>During a review of Resident 1's Electronic Health Record (EHR), in the orders section, indicated Resident 1 would attend scheduled hemodialysis (a process of filtering the blood of a person whose kidneys are not working normally) sessions three times a week. The specific days were Monday, Wednesday, and Friday at 2 PM. The order indicated Resident 1 was to be picked up at 1:30 PM by "...[name of transportation company] ..."</p> <p>During an interview on 9/6/24, at 1:25 PM, with the Assistant Director of Nursing (ADON), the ADON confirmed Resident 1 did not go to his scheduled dialysis session on 8/16/24. The ADON stated Resident 1's next dialysis session was made for 8/19/24.</p>	F 698	<p>What measure or systematic changes will be put into place to ensure deficient practice does not recur: List of dialysis resident scheduled for the week will be discussed at daily stand-up meeting to determine transportation needs. Responsible Party: Social Service Designee will provide the list, and the Nurse Secretary will ensure that residents scheduled for dialysis have transportation to take them to the clinic. Transportation resources will be utilized in the order of need from list of Transportation company doing business to the facility, UBER transport, facility owned non-medical transport. Administrator/DON or designee will ensure overall compliance. Correction Date: 10/22/2024</p> <p>How the facility plans to monitor performance to make sure that the solutions are sustained:</p> <p>Dialysis residents schedule will be discussed daily at stand-up meetings to determine transportation need. Resources will be utilized to ensure transportation is available as scheduled. The subject will be included in the Quality Assurance Meeting Quarterly to measure the effectiveness of the systematic change and revise the system as needed. Responsible Party: Social Service Designee, Nurse Assistant to implement the system Administrator/DON or Designee to ensure overall compliance. Correction Date: 10/22/2024</p>	<p>10-22-24 MBA</p> <p>10-22-24 MBA</p>	

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F 698	<p>Continued From page 2</p> <p>During an interview on 9/6/24, at 1:33 PM, with Licensed Nurse (LN) 1, LN 1 stated Resident 1 had missed a regularly scheduled dialysis session due to transportation issues. LN 1 further stated she would have preferred to make an appointment for a make-up session on the same day a resident missed a session or as soon as possible.</p> <p>During an interview on 9/6/24, at 2:08 PM, with LN 2, LN 2 stated dialysis was very important. LN 2 stated it was concerning that Resident 1 went four days without receiving dialysis treatment. LN 2 further stated four days was a long wait and that a make-up session should have occurred the very next day after a missed session.</p> <p>During an interview on 9/6/24, at 2:19 PM, with LN 3, LN 3 stated there could be many complications that occur with missing dialysis appointments.</p> <p>During an interview on 10/10/24, at 12:55 PM, with the Nursing Secretary (NS), the NS stated she did not try calling the two private transportation and ride-sharing companies to request services for medical transport. The NS further stated she did not call an ambulance for an emergency pick-up either. The NS stated she did not notify the resident's family for a possible pick-up as well.</p> <p>During a phone interview on 10/11/24, at 2:25 PM, with the Primary Doctor (PD), the PD stated she could not recall if anyone called her from the facility regarding Resident 1 missing his dialysis appointment.</p>	F 698	<p>How corrective actions will be accomplished for those residents found to have been affected: Routine Labs and results completed in dialysis clinic are requested and received copies to this date were filed in residents clinical records by Medical Records Designee. Lab result will be available for attending physician's review.</p> <p>Responsible Party : DON/Designee will monitor compliance with weekly dialysis audit Correction Date: 10/22/2024</p> <p>How the facility will identify other residents having the potential to be affected : List of dialysis resident will be provided by Medical Records to determine if there are missing monthly labs from the dialysis center. Medical Records will follow up with the Dialysis Center for copies of lab results and missing results will be brought up at the daily stand-up meeting for next level of action by the DON/Designee to ensure compliance. An In-service was conducted by the DON to all LN, Social Service Designee and Nurse Secretary. Responsible Party: Medical Record will implement; DON/Designee will monitor compliance; Administrator will ensure overall compliance.</p> <p>Correction date: 10/22/2024</p>	<p>10-22-24 W/SR</p> <p>10-22-24 W/SR</p>	

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F 698	<p>Continued From page 3</p> <p>During a concurrent interview and record review on 10/10/24, at 2:50 PM, with the DON and LN 6, a facility contract titled, "NURSING HOME DIALYSIS TRANSFER AGREEMENT," dated 1/16/2024 was reviewed. The DON confirmed the facility was responsible for providing transportation for residents to and from the dialysis center.</p> <p>During a phone interview on 10/16/24, at 3:25 PM, with the Dialysis Nurse (DN) 1, DN 1 stated Resident 1 did not attend his scheduled dialysis session on 8/16/24 due to transport not being available at the facility.</p> <p>A review of an undated facility policy and procedure titled, "PRE AND POST DIALYSIS MONITORING," in the section "Before Dialysis Procedure," indicated, " ...If resident is cleared to go to dialysis center, arrange transportation services and secure transfer information for the dialysis center ..."</p> <p>2. During a concurrent interview and record review on 10/10/24, at 1:50 PM, with LN 6, LN 7, and the DON, Resident 1's "[dialysis center] Labs," dated 4/29/24 to 5/29/24 were reviewed. LN 6 stated labs were being done at the dialysis center monthly for Resident 1. LN 6 confirmed the facility did not have any lab results for Resident 1 since 5/29/24. The DON stated the charge nurses were responsible for reviewing the labs. The DON further stated the PD would review the labs only if they were critical values (abnormal lab values that require a physician's attention) and did not review them monthly.</p> <p>During a phone interview on 10/11/24, at 2:25</p>	F 698	<p>What measures or systematic changes will be put into place to ensure deficient practice does not recur:</p> <p>Routine labs and results completed at the dialysis center will be requested for record keeping at the resident's clinical record to be available for the attending physician's review.</p> <p>Dialysis Center will be requested to provide any labs that are done STAT in the Post Dialysis Communication note to be reviewed by the LN and notify Physician for any critical results. Medical Records Designee will request copies of all routine lab works completed the previous month every first week of the following month.</p> <p>The LN will request a copy of the results of labs done STAT at the dialysis clinic and notify he Physician of results.</p> <p>In-service was conducted by the DON to LN; Medical Records on the Policy and Procedure of Dialysis Care on 10/22/2024.</p> <p>Responsible Party: DON/Designee will monitor compliance with weekly audits. Administrator will ensure overall compliance</p> <p>Correction Date: 10/22/2024</p>	<p>10-78-24</p> <p>MBM</p>	

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F 698	<p>Continued From page 4</p> <p>PM, with the PD, the PD stated she did not review the monthly labs for Resident 1. The PD further stated that unless labs were critical, she would not review them. The PD stated she did not order a monthly lab draw for Resident 1 because he got them done at the dialysis center.</p> <p>During a phone interview on 10/16/24, at 3:25 PM, with the Dialysis Nurse (DN) 1, DN 1 stated the facility had to request labs from the dialysis center to view them. DN 1 further stated Resident 1 was getting labs drawn monthly as well some labs were drawn every two weeks. DN 1 stated Resident 1's last lab draw was on 8/14/24.</p> <p>A review of an undated facility policy and procedure titled "DIALYSIS CARE," in the section "Procedures," indicated, " ...Information such as the following, shall be documented on resident's medical record ...Laboratory tests as indicated ..."</p>	F 698	<p>How the facility plans to monitor its performance to make sure the solutions are sustained.</p> <p>The subject will be included in the daily stand-up meeting for consistent follow up. Responsible Party: Medical Records Designee, to ensure Lab results are submitted by Dialysis Center DON to monitor compliance.</p> <p>The Administrator will include in the Quality Assurance Quarterly meeting to measure the effectiveness of the solution or revise as needed. Correction Date: 10/22/2024</p>	<p>10-22-24 WTA</p>	