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PRINTED: 12/18/2014
FORM APPROVED

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA030000108	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/08/2014
NAME OF PROVIDER OR SUPPLIER WHITNEY OAKS CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 3529 WALNUT AVENUE CARMICHAEL, CA 95608 <i>Off ca 2/6/15.</i>		
(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)	(X6) COMPLETE DATE
A 000	Initial Comments The following reflects the findings of the California Department of Public Health during a Licensing survey. Representing the Department: HFEN# 1958 / 29917 HFEN# 2433 / 29108 HFEN# 2589 / 31640 HFEN# 2659 / 32476 HFEN# 2741 / 33361	A 000	PLAN OF CORRECTIONS "This plan of correction is prepared as part of the quality assurance process for the provider. This plan of correction and any attached documents are prepared with substantial reliance upon privileged peer review information and/or reports and as such are protected from discovery." "This plan of correction is prepared, submitted and/or executed solely because it is required by local, state and/or federal regulations, codes, and/or guidelines. As this transmission is required by law, it is not a waiver of the provisions within applicable laws and regulations or any other codes, statutes or regulations." A-310. Dietary preference for resident 7, 15, 26 were updated by the Registered Dietician (RD) and the Food Service Supervisor (FSS) on 12/23/14. For all other residents with the potential to be affected, the RD	
A 310	T22 DIV5 CH3 ART3-72335(a)(3) Dietetic Service--Food Service (a) The dietetic service shall provide food of the quality and quantity to meet each patient's needs in accordance with the physicians' orders and to meet "The Recommended Daily Dietary Allowance," the most current edition, adopted by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences, and the following: (3) Patient food preferences shall be adhered to as much as possible and substitutes for all food refused shall be from appropriate food groups. Condiments such as salt, pepper or sugar shall be available at each meal unless contraindicated by the diet order. This Statute is not met as evidenced by: Based on observation, document review, patient and staff interviews, the facility failed to honor and adhere to patient food preferences for 2 of 24 sampled patients and 1 of 10 random patients (7, 15, and 26). This failure resulted in patients being served foods not of their liking. Findings:	A 310		

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

TITLE

(X8) DATE

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If continuation sheet 1 of 5

12.25.14

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California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA030000105	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/05/2014
NAME OF PROVIDER OR SUPPLIER WHITNEY OAKS CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 3528 WALNUT AVENUE CARMICHAEL, CA 95608		
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A310	<p>Continued From page 1</p> <p>1. In an interview with Patient 7, conducted on 12/3/14 at 4:30 p.m., the patient expressed being displeased with the kitchen, because they failed to adhere to her specific food likes and dislikes. She expressed that due to personal and/or religious reasons, she does not eat pork or pork products. However, even though she had previously mentioned this to the dietary department and was noted in her diet card, she was still occasionally being served ham and other pork products.</p> <p>In an interview with the Dietary Supervisor (DS), conducted on 12/4/14 at 9:20 a.m., the DS said that they have alternatives for patients who do not eat pork. The DS added that instead of pork, at times, turkey ham or other turkey made products would be served, which may resemble pork. However, when Patient 7 was questioned again in a subsequent interview, she affirmed that she knew she was served pork, because it smelled like pork flesh.</p> <p>2. On 12/3/14 at 4:16 p.m., Random Patient 26 complained to the Department that his food preferences were not being honored by the facility. He said that the day after being admitted, he made it clear to the dietician that he did not consume milk or eggs. However, he was still frequently served milk and eggs against his wishes.</p> <p>Upon record review, and in an interview with the DS on 12/4/14 at 8:55 a.m., the DS noted that nothing was printed on the diet card under "dislikes" for Patient 26. However, the progress notes did reflect that the Registered Dietician spoke with the patient the day after he was admitted, and noted in her notes that the patient</p>	A310	<p>and the FSS visited with residents during meals through 12/31/14 and updated food preferences as requested. Upon admission, during each residents' care conference and on as a needed basis, the RD or designee will meet with the resident or the responsible party, review the food preferences and make changes as requested. The meal preference changes will be reflected on the meal tickets. The administrator in-serviced the RD and FSS on this procedure on 12/23/14. Weekly times 4 weeks then monthly thereafter, the RD or her designee will do random audits and ensure that residents' meal preferences are honored and reflected on the meal tickets. The RD will report any non compliance issues to the quality assurance committee for recommendations as needed.</p>	

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If continuation sheet 2 of 5

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NAME OF PROVIDER OR SUPPLIER WHITNEY OAKS CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 3528 WALNUT AVENUE CARMICHAEL, CA 95808			
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A 310	Continued From page 2 did not drink milk, or eat eggs. When the RD was questioned in a subsequent interview about the patient's food preferences, she acknowledged interviewing the patient and noting in her notes his dislike of eggs and milk. When the RD was asked as to why the patient's food preferences were not listed in his diet card, she simply responded, "I don't know what to tell you." 3. During a concurrent observation and interview with Patient 15 on 12/2/14 at 8:50 a.m., he stated that he had requested Cheerios for breakfast and the facility "keeps sending me raisin bran instead." Patient 15 stated he cannot eat the raisins because they "stick in my teeth." Patient 15 was observed picking the raisins out of a bowl of raisin bran cereal. A subsequent review of the clinical record of Patient 15 included a document titled Progress Notes dated 8/22/14 with the following notation; "...Pt (patient) provided with preferred items of cheerios..." During an interview with the Registered Dietician on 12/4/14 at 9:40 a.m., she stated she was unaware of Patient 15's request for cheerios. The RD further stated cheerios could be provided to the patient. Review of the facility policy titled Resident Food Preferences dated December 2008 included the following: "...Nutritional assessments will include an evaluation of individual food preference..."	A 310			
A 998	T22 DIV5 CH3 ART5-72545(a)(12)(E) Admission Records	A 998			

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If continuation sheet 3 of 5

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NAME OF PROVIDER OR SUPPLIER WHITNEY OAKS CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 3829 WALNUT AVENUE CARMICHAEL, CA 95608		
(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 998	<p>Continued From page 3</p> <p>(a) For each patient a facility shall complete an admission record which shall include the following:</p> <p>(12) An inventory including but not limited to:</p> <p>(E) Other valuable items, so identified by the patient, family or authorized representative.</p> <p>This Statute is not met as evidenced by: Based on staff interview and clinical record review, the facility failed to maintain a complete clinical record for one out of 24 sampled patients (24) when there was no personal effects inventory checklist found on Patient 24's record file. This failure could lead to improper identification of patients' belongings that were brought in to the facility.</p> <p>Findings:</p> <p>A review of Patient 24's clinical record revealed the following:</p> <p>a. There was no inventory of personal effects during admission as well during discharge.</p> <p>b. A note written by a licensed nurse during discharge only indicated "...Resident was assisted to vehicle by staff with all her belonging(s)..."</p> <p>During an interview with the Medical Records Director (MRD) on 12/4/14 at 5 p.m., she was asked to verify the patient's inventory of personal effects. She stated that she could not find one.</p> <p>During an interview with the Director of Nursing (DON) on 12/5/14 at 11:30 a.m., she was asked</p>	A 998	<p>A-998</p> <p>Resident 24 was discharged from the facility on 11/7/14.</p> <p>All residents have the potential to be affected by this deficient practice, thus the Medical Record Director (MRD) and her assistant completed a facility audit on inventory of residents personal effects on 12/24/14 to ensure that they were completed. Audits were given to the DON for follow up and were completed accordingly.</p> <p>Upon admission, the Licensed nurses or designee will record the residents personal belongings in the facility inventory record. The MRD or designee will audit the residents chart within 72 hours and verify that the inventory is completed. The audits will be handed to the Assistant Director of Nursing (ADON) for follow up as needed. The Director of nursing in-serviced the licensed Nurses and the medical record staff regarding this process on 12/24/14.</p>	

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If continuation sheet 4 of 5

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

WHITNEY OAKS CARE CENTER

3529 WALNUT AVENUE
CARMICHAEL, CA 95608

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A 998	<p>Continued From page 4</p> <p>regarding the patient's inventory of personal effects. She stated that a nurse completed the form during admission when a patient had belongings with him or her. Otherwise, the form stayed in the patient's chart and the staff continued to fill it out when and if the family/responsible party would bring in things for the patient.</p> <p>A review of the facility's policy titled Personal Property, dated December, 2012, indicated "...The [patient's] personal belongings and clothing shall be inventoried and documented upon admission..."</p>	A 998	<p>The MRD will report any non compliance issues to the quality assurance committee for recommendations as needed.</p>	

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If continuation sheet 8 of 5