

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA010000047	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/23/2022
NAME OF PROVIDER OR SUPPLIER NORTHBROOK HEALTHCARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 64 NORTHBROOK WAY WILLITS, CA 95490		
(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 000	<p>Initial Comments</p> <p>The following reflects the findings of the California Department of Public Health during a staffing audit visit for 24 randomly selected days from 12/30/2021 to 03/31/2022.</p> <p>Representing the Department: M.S., Associate Governmental Program Analyst.</p> <p>Welfare and Institutions (W&I) Code section 14126.022 sets forth the Department's authority to conduct audits of direct caregiver nursing services provided to residents of skilled nursing facilities, and to establish procedures for conducting such audits through All Facility Letters (AFLs). <http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=14126.022.&lawCode=WIC></p> <p>AFL 21-11, setting forth the audit process and guidelines for facilities is available through the following link: <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-11.aspx></p> <p>Health and Safety Code (HSC) 1337-1338.5, sets forth the requirements for Certified Nurse Assistants is available through the following link: <https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?division=2.&chapter=2.&lawCode=HSC&article=9></p> <p>W&I section 14126.022 requires the Department to assess an administrative penalty to a SNF if the Department determines that the SNF fails to meet the DHPPD requirements pursuant to HSC sections 1276.5 or 1276.65. The Department shall assess an administrative penalty to any facility that fails to meet the applicable standard</p>	A 000	<p>The payroll staff or designee will run an hours report daily to capture any delinquent punches to the payroll system.</p> <p>The delinquent hours will then be reviewed and followed-up by the department manager, Director of Nursing, or designee.</p> <p>Hours worked by other staff holding a certification or licensed will be captured with time adjustments made in the payroll system or a CDPH 530 form.</p> <p>CDPH forms will be maintained with the NHPPD forms for the date specified and the use of the CDPH forms will be communicated accurately.</p> <p>The payroll personnel will communicate the projected hours daily, with weekend hours being communicated on Fridays, and assure staffing schedule is appropriate.</p> <p>Staff education will be provided by Administrator to include the "The hours scheduled, and the hours worked" acknowledgement page.</p>	<p>9/18/24</p> <p>9/20/24</p> <p>9/20/24</p> <p>9/20/24</p> <p>9/16/24</p> <p>9/20/24</p>

Licensing and Certification Division
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

YDPY11

If continuation sheet 1 of 3



California Department of Public Health

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A 000	<p>Continued From page 1</p> <p>for staffing requirements on any given day. The applicable standard is 3.5 DHPPD and 2.4 DHPPD (CNA), unless an approved Workforce Shortage or Patient Needs Waiver is granted.</p> <p>The statute was not met as evidenced by the following findings:</p> <p>Final Audit Result:</p> <p>Total Distinct Non-Compliant Day(s) = 6</p> <table border="1"> <thead> <tr> <th>Date</th> <th>3.5</th> <th>2.4</th> </tr> </thead> <tbody> <tr><td>01/04/2022</td><td>4.29</td><td>2.19</td></tr> <tr><td>01/07/2022</td><td>4.10</td><td>2.02</td></tr> <tr><td>01/16/2022</td><td>3.71</td><td>2.08</td></tr> <tr><td>01/18/2022</td><td>4.22</td><td>2.31</td></tr> <tr><td>01/20/2022</td><td>*3.24*</td><td>1.72</td></tr> <tr><td>01/21/2022</td><td>4.35</td><td>1.67</td></tr> <tr><td>01/27/2022</td><td>4.42</td><td>1.59</td></tr> <tr><td>02/08/2022</td><td>4.94</td><td>1.98</td></tr> <tr><td>02/09/2022</td><td>4.89</td><td>2.09</td></tr> <tr><td>02/11/2022</td><td>4.19</td><td>1.78</td></tr> <tr><td>02/13/2022</td><td>3.60</td><td>1.83</td></tr> <tr><td>02/17/2022</td><td>4.15</td><td>1.48</td></tr> <tr><td>02/19/2022</td><td>4.29</td><td>2.04</td></tr> <tr><td>02/21/2022</td><td>*3.46*</td><td>1.58</td></tr> <tr><td>02/27/2022</td><td>3.65</td><td>1.75</td></tr> <tr><td>03/02/2022</td><td>3.68</td><td>2.31</td></tr> <tr><td>03/04/2022</td><td>*3.49*</td><td>1.78</td></tr> <tr><td>03/10/2022</td><td>*3.40*</td><td>2.00</td></tr> <tr><td>03/18/2022</td><td>3.61</td><td>2.10</td></tr> <tr><td>03/20/2022</td><td>3.71</td><td>1.71</td></tr> <tr><td>03/21/2022</td><td>*3.20*</td><td>1.20</td></tr> <tr><td>03/23/2022</td><td>3.63</td><td>2.36</td></tr> <tr><td>03/24/2022</td><td>*3.49*</td><td>2.04</td></tr> <tr><td>03/25/2022</td><td>3.76</td><td>2.25</td></tr> </tbody> </table> <p>*x.xx* = non-compliant date</p>	Date	3.5	2.4	01/04/2022	4.29	2.19	01/07/2022	4.10	2.02	01/16/2022	3.71	2.08	01/18/2022	4.22	2.31	01/20/2022	*3.24*	1.72	01/21/2022	4.35	1.67	01/27/2022	4.42	1.59	02/08/2022	4.94	1.98	02/09/2022	4.89	2.09	02/11/2022	4.19	1.78	02/13/2022	3.60	1.83	02/17/2022	4.15	1.48	02/19/2022	4.29	2.04	02/21/2022	*3.46*	1.58	02/27/2022	3.65	1.75	03/02/2022	3.68	2.31	03/04/2022	*3.49*	1.78	03/10/2022	*3.40*	2.00	03/18/2022	3.61	2.10	03/20/2022	3.71	1.71	03/21/2022	*3.20*	1.20	03/23/2022	3.63	2.36	03/24/2022	*3.49*	2.04	03/25/2022	3.76	2.25	A 000	<p>The systematic changes and education will be reviewed at least quarterly by the Payroll/Human Resource designee at the QAPI meeting to assure the process is affective and review any revisions to the system is required or further staff education is needed.</p>	01/30/23
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