

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA070000062	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 11/07/2019
NAME OF PROVIDER OR SUPPLIER WESTLAND HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 100 BARNET SEGAL LANE MONTEREY, CA 93940			
(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 03/17/2019 to 06/16/2019.</p> <p>Representing the Department: J.M., 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 18-27, 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-18-27.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			

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

TITLE

(X6) DATE

STATE FORM

0899

ZGK411

If continuation sheet 1 of 2

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DON

4/28/20

California Department of Public Health

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

WESTLAND HOUSE

**100 BARNET SEGAL LANE
MONTEREY, CA 93940**

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A 000	Continued From page 1 for staffing requirements on any given day. Prior to July 1, 2019, the applicable standard for purposes of assessing this penalty is 3.2 NHPPD. On or after July 1, 2019, the applicable standard is 3.5 DHPPD and 2.4 DHPPD (CNA), unless a requested Workforce Shortage or Patient Needs Waiver is approved. The statute was met as evidenced by the following findings: Based on record review and interview, the above nursing facility was found in compliance with HSC 1276.5(a), the requirement for 3.2 direct care hours per patient day. Based on record review and interview, the above nursing facility was found in compliance with HSC 1276.65(c)(1)(B), the requirement for a minimum of 3.5 direct care hours per patient day.	A 000	1. On days cited; 3/28/19, 4/1/19, 4/7/19 and 6/14/19 CNA staffing was short due to unanticipated extended medical leave. In order to augment staffing, a licensed staff (RN/LVN) was substituted to deliver a higher level of care and overall higher direct patient care hours over 5 hours for dates 3/28/19, 4/1/19, 4/7/19 and 6/14/19. 2. Recruitment has been ongoing and current federal FMLA guidelines prohibit the replacement of the CNA who is out on medical leave. We will utilize supplemental staff until such time the employee returns to work or is deemed unable to do so by his/her physician. 3. The DON and the director of the float pool at Community Hospital of the Monterey Peninsula collaborated on backup staffing plan to utilize float pool CNAs cross trained to SNF/long term care.	
A 205	HSC 1276.65(c)(1)(C) SAS - 2.4 Standard (C) Skilled nursing facilities shall have a minimum of 2.4 hours per patient day for certified nurse assistants in order to meet the requirements in subparagraph (B). This Statute is not met as evidenced by: Facility failed to meet 2.4 direct care service hours per patient day (DHPPD), performed by certified nurse assistants, pursuant to HSC 1276.65(c)(1)(C) for 4 out of 24 days.	A 205	4. The staffing assignment will be checked weekly in advance by the DON for advanced planning. 5. Any unexpected shortage where staffing does not meet the 2.4 hours of direct care for CNA we will supplement by: a) Utilize van driver who is also a licensed CNA for coverage b) Accept voluntary overtime from CNA staff c) Will supplement with backup CNA from the float pool 6. The DON will monitor staffing assignments daily to ensure compliance with 2.4 hours of direct care for CNAs.	