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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                          | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br>055474 | (X2) MULTIPLE CONSTRUCTION<br>A. Building<br>B. Wing                                     | (X3) DATE SURVEY COMPLETED<br><br>07/23/2024 |
| NAME OF PROVIDER OR SUPPLIER<br><br>Woodcrest Post Acute & Rehabilitation |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><br>8133 Magnolia Avenue<br>Riverside, CA 92504 |  |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

| (X4) ID PREFIX TAG  | SUMMARY STATEMENT OF DEFICIENCIES<br>(Each deficiency must be preceded by full regulatory or LSC identifying information)  |
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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 48240</p> <p>Based on observation, interview, and record review, the facility failed to provide sufficient nursing staffing to provide care and services for the residents of the facility.</p> <p>This failure had the potential to cause residents in the facility to experience delays and inadequate care.</p> <p>Findings:</p> <p>On July 23, 2024, at 5:06 a.m., an unannounced visit was conducted at the facility.</p> <p>On July 23, 2024, at 5:26 a.m., during an interview with Certified Nurse Assistant (CNA) 1, CNA 1 stated the facility needed more staffing so they can be able to do their work effectively for the residents.</p> <p>On July 23, 2024, at 5:58 a.m. during an interview with Licensed Vocational Nurse (LVN) 1, LVN 1 stated there had been staffing issues at the facility. LVN 1 stated there was one night shift (11-7) when there was only four CNAs on the floor. LVN 1 stated they tried to get coverage, but nobody wanted to work. LVN 1 further stated that they are always short-staffed, weekday or weekend.</p> <p>On July 23, 2024, at 5:50 a.m. during an interview with CNA 2, CNA 2 stated she's had 26-27 residents, and that was unmanageable. CNA 2 stated, other CNAs were calling off and not having any CNAs.</p> <p>On July 23, 2024, at 6:30 a.m., during an interview with LVN 2, LVN 2 stated that there had been one night shift when there was only four CNAs and the licensed nurses helped on the floor.</p> <p>On July 23, 2024, at 8:50 a.m., during an interview with Resident 4, Resident 4 stated the facility did not have enough staff. Resident 4 stated the staff were always saying they were busy and were short-handed. Resident 4 stated staff do not answer his call button. Resident 4 stated there was one time when he asked to be changed at 3:30 p.m., and a CNA changed him at 9:00 p.m. Resident 4 further stated that he had not been showered since May 28, 2024. Resident 4 stated he received a bed bath, but he preferred showers. Resident 4 stated he did not bother to ask staff to give him a shower because he knew they were always short on staff.</p> <p>(continued on next page)</p> |

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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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>On July 23, 2024, at 10:19 a.m., during an interview with the Staffing Coordinator (SC), the SC stated the required Direct Care Service Hours per Patient Day (DHPPD- a tool to assess the value nursing staff provides around patient safety and care quality) was 3.5 and the CNA DHPPD was 2.4. The SC stated there should be 12 to 14 CNAs in the morning shift (7-3), 10 to 12 CNAs in the evening shift (3-11), and nine to 10 CNAs in the night shift and it depends on the census (number of residents in the facility).</p> <p>A review of the DHPPD and nursing assignment sheets conducted with the SC, indicated the following:</p> <ol style="list-style-type: none"> <li>1. On July 13, 2024, the census (number of residents in the facility) was 104, the actual DHPPD was 3.8 and actual CNA DHPPD hours was 2.12; there were four CNAs for the night shift. The SC stated the four CNAs were assigned 26 residents each.</li> <li>2. On July 14, 2024, the census was 105, the actual DHPPD hours was 2.88 and CNA DHPPD hours was 1.31.</li> <li>3. On July 19, 2024, the census was 102, the actual DHPPD hours was 4.10 and CNA DHPPD hours was 2.31.</li> <li>4. On July 20, 2024, the census was 104, the actual DHPPD hours was 3.47 and CNA DHPPD hours was 1.91.</li> <li>5. On July 21, 2024, the census was 103, the actual DHPPD hours 2.29 and CNA DHPPD hours was 1.10.</li> </ol> <p>The SC stated proper care is not provided to the residents when the required DHPPD hours were not met and when CNAs had 26 resident each. The SC also stated the facility staff had more workload which interfered with providing quality care.</p> <p>Further review of the nursing assignment sheet dated July 13, 2024, indicated that LVN 1, and LVN 2 worked the night shift and there was only four CNAs.</p> <p>A review of Resident 4 ' s medical record indicated Resident 4 was admitted to the facility on [DATE], with diagnoses which included end stage renal disease (a medical condition in which a person ' s kidneys stopped functioning on a permanent basis). Resident 4 ' s History and Physical dated June 12, 2024, indicated Resident 4 had the capacity to understand and make decisions. Resident 4 ' s care plan dated January 20, 2024, indicated Resident 4 had a self-care deficit related to inability perform activities of daily living (ADL) and he required total assist with bathing. There was no documented evidence that Resident 4 refused showers nor that he had a preference of a bed bath.</p> <p>On July 23, 2024, at 12:05 p.m., during an interview with Registered Nurse (RN) 1, RN 1 stated if a resident wanted to shower then staff should provide the shower. RN 1 stated there may be times when showers are offered but residents would decline. A concurrent review of Resident 4 ' s medical record was conducted with RN 1. RN 1 stated Resident 4 ' s care plan did not indicate any refusal of shower nor preference of bed bath. RN 1 stated Resident 4 ' s ADL Bathing Sheet indicated that he did not receive a shower between June 25, 2024, and July 22, 2024.</p> <p>(continued on next page)</p> |  |  |

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| <p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>                    | <p>On July 23, 2024, at 12:50 p.m., during an interview with the Director of Nursing (DON), the DON stated the required DHPPD hours was 3.5 and CNA DHPPD hours was 2.4. The DON stated the facility staffed beyond the requirement. The DON stated some staff are asked to work additional hours, partial or double shifts and they were actively recruiting more staff through job postings and referrals. The DON stated there could be resident dissatisfaction, delay in answering call lights, somethings may get missed when the facility is not adequately staffed and when four CNAs had 26 residents each.</p> <p>On July 23, 2024, at 2:19 p.m., during a follow up interview with the SC, the SC stated for a facility census of 104, there should be 12 CNAs in the morning shift, nine CNAs in the evening shift and seven to eight CNAs in the night shift.</p> <p>A review of the facility's policy and procedure, titled Staffing, dated September 2019, indicated .our facility provides sufficient numbers of staff with the skills and competency necessary to provide care and services for all residents . licensed nurses and certified nursing assistants are available 24 hours a day to provide direct resident care services .staffing numbers and the skill requirements of direct care staff are determined by the needs if the residents based on each resident's plan of care .</p> |  |  |