

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055800	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/30/2024
NAME OF PROVIDER OR SUPPLIER Stonebrook Health and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE 350 DE Soto Drive Los Gatos, CA 95032	

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 (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Encode each resident's assessment data and transmit these data to the State within 7 days of assessment.</p> <p>31524</p> <p>Based on interview, record review, and document review, the facility failed to complete and transmit discharge Minimum Data Set (MDS) assessments for 2 (Resident #38 and Resident #51) of 2 sampled residents reviewed for resident assessment.</p> <p>Findings included:</p> <p>The Centers for Medicare & Medicaid Services Long-Term Care Facility Resident Assessment Instrument 3.0 User's Manual, dated 10/2023, indicated, Discharge assessment refers to an assessment required on resident discharge from the facility.</p> <p>1. An Admission Record revealed the facility initially admitted Resident #38 on 12/13/2023. According to the Admission Record, the resident had a medical history that included diagnoses of pleural effusion, atrial fibrillation, and peripheral vascular disease.</p> <p>An admission MDS, with an Assessment Reference Date (ARD) of 12/19/2023, revealed Resident #38 had a Brief Interview for Mental Status (BIMS) score of 15, indicating the resident had intact cognition.</p> <p>Resident #38's Progress Notes, dated 02/20/2024 at 6:08 PM, revealed Resident #38 discharged from the facility.</p> <p>Review of Resident #38's medical record, revealed no evidence to indicate a discharge MDS was completed.</p> <p>2. An Admission Record revealed the facility initially admitted Resident #51 on 01/03/2024. According to the Admission Record, the resident had a medical history that included diagnoses of left radius fracture, type two diabetes mellitus, and morbid obesity.</p> <p>An admission MDS, with an Assessment Reference Date (ARD) of 01/21/2024, revealed Resident #51 had a Brief Interview for Mental Status (BIMS) score of 11, indicating the resident had moderate cognitive impairment.</p> <p>Resident #51's Progress Notes, dated 02/17/2024 at 6:50 PM, revealed Resident #51 discharged from the facility.</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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0640</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of Resident #51's medical record, revealed no evidence to indicate a discharge MDS was completed.</p> <p>During an interview on 05/30/2024 at 12:04 PM, the MDS Coordinator stated the facility's electronic medical record system generated a report which showed when a resident's MDS assessments were due. The MDS Coordinator stated when a resident discharged from the facility, the facility was required to complete and submit a discharge MDS within 14 days. The MDS Coordinator stated Resident #38 and Resident #51 should have had a completed and submitted discharge MDS assessment.</p> <p>During an interview on 05/30/2024 at 12:10 PM, the Director of Nursing stated she expected the discharge MDS to be completed and submitted within the required 14 days.</p> <p>During an interview on 05/30/2024 at 12:53 PM, the Administrator stated he expected MDS assessments to be submitted timely and expected the nursing department to complete a resident's MDS assessment as required.</p>