

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056243	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/23/2024
NAME OF PROVIDER OR SUPPLIER Western Slope Health Center		STREET ADDRESS, CITY, STATE, ZIP CODE 3280 Washington Street Placerville, CA 95667	

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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</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>48175</p> <p>Based on interview and record review, the facility failed to ensure the minimal staffing requirements were met when:</p> <ol style="list-style-type: none"> 1. A minimum of 3.5 direct care services hours per day (DHPPD - a tool to assess the value nursing staff provides to patient safety and care quality) were not met for three out of 23 days audited; and, 2. A minimum of 2.4 Certified Nursing Assistant (CNA) DHPPD for 21 out of 23 days audited were not met. <p>These failures had the potential to prevent residents from receiving necessary care and maintaining the highest practicable physical, mental, and psychological well-being.</p> <p>Findings:</p> <p>A review of the facility's NHPPD Scheduled Daily Staffing Overview . forms indicated the facility did not meet a minimum of 3.5</p> <p>DHPPD on:</p> <p>9/1/24 with 3.10 hours, 9/8/24 with 3.34 hours, and 9/16/24 - with 3.41 hours.</p> <p>A review of the facility's NHPPD Scheduled Daily Staffing Overview . forms indicated the facility did not meet a minimum of 2.4</p> <p>CNA DHPPD hours on:</p> <p>9/1/24 with 2.32 hours, 9/2/24 with 2.32 hours, (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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>9/3/24 with 2.32 hours,</p> <p>9/4/24 with 2.37 hours,</p> <p>9/5/24 with 2.29 hours,</p> <p>9/6/24 with 2.37 hours,</p> <p>9/7/24 with 2.37 hours,</p> <p>9/8/24 with 2.29 hours,</p> <p>9/9/24 with 2.20 hours,</p> <p>9/12/24 with 2.37 hours,</p> <p>9/13/24 with 1.62 hours,</p> <p>9/14/24 with 1.95 hours,</p> <p>9/15/24 with 1.79 hours,</p> <p>9/16/24 with 1.77 hours,</p> <p>9/17/24 with 1.74 hours,</p> <p>9/18/24 with 2.13 hours,</p> <p>9/19/24 with 1.91 hours,</p> <p>9/20/24 with 2.00 hours,</p> <p>9/21/24 with 1.81 hours,</p> <p>9/22/24 with 1.98 hours, and</p> <p>9/23/24 with 2.00 hours.</p> <p>During an interview on 9/23/24 at 2:15 p.m. with the Certified Assistant Nurse/Ward Clerk (CNA/WC), the CNA/WC stated, Call lights are not answered timely since we don't have enough staff on the floor .There are some challenging times when it takes about 30 minutes for the call lights to be answered. Night shift staffing is bad and could contribute to call lights not being answered timely and could lead to falls and accidents.</p> <p>During an interview on 9/23/24 at 2:23 p.m. with CNA 1, CNA 1 stated, .Staffing can be better. It seems like we are always short-staffed .We have many call-offs, and there is registry staff in every shift. We need more CNAs to provide quality care to our residents and not put the residents at safety risk.</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 - Few</p>	<p>During an interview on 9/23/24 at 2:37 p.m. with CNA 2, CNA 2 stated, .Facility uses a lot of registries in every shift, and you hear more and more complaints by the residents that call lights are not answered promptly .Call lights are often not answered for 15 to 20 minutes . It would be nice if everyone at the facility answered call lights when they were on. Just find out what the resident needs.</p> <p>During an interview on 9/23/24 at 2:51 p.m. with Licensed Nurse 1, LN 1 stated, CNAs are often short-staffed, leading to call lights not being answered promptly.</p> <p>During an interview on 9/23/24 at 4:03 p.m. with Resident 1, Resident stated, .It takes about 10 to 15 minutes to have my call light answered most of the time and takes even longer during the night shift . There are not enough CNAs to take care of us.</p> <p>During an interview on 9/23/24 at 4:18 p.m. with Resident 2, Resident 2 stated, .Call lights are not answered timely because the CNAs are very busy.</p> <p>During an interview on 9/23/24 at 4:24 p.m. with Resident 3, Resident 3 stated, .The call lights are not answered timely, and there could be a wait of about an hour, especially on the night shift . Registry CNAs do not know our routine, and it's challenging to keep repeating the same thing. I am here to be taken care of and not to give instructions daily on how much care should be given. I need consistency.</p> <p>During an interview on 9/23/24 at 5 p.m. with the DON and ADON, the DON and ADON responded, .It would be nice not to use registry and to have the facility have in-house staff . That could contribute to the call lights not being answered timely.</p> <p>During a review of the facility's policy and procedure (P&P) titled, Answering the Call Light, dated April 2024, the P&P indicated, .Answer the resident's call as soon as possible and as practicable .</p> <p>A review of the All Facilities Letters (AFL: a letter to healthcare facilities that communicates policy and guidance) 19-16, issued on 4/9/19, indicated, .To: SKILLED NURSING FACILITIES (SNFs) .The 3.5 DHPPD staffing requirement, of which 2.4 hours per patient day must be performed by CNAs, is a minimum requirement for SNFs. SNFs shall employ and schedule additional staff and anticipate individual patient needs for the activities of each shift, to ensure patients receive nursing care based on their needs . Only direct caregivers shall count toward the 3.5 and 2.4 DHPPD staffing standards . Any facility that falls below either the 3.5 or 2.4 DHPPD staffing requirement for any audited day is out of compliance .CDPH will issue one deficiency for non-compliance with each of the applicable staffing standards .regardless of the number of non-compliant days .</p>		