

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056359	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/20/2024
NAME OF PROVIDER OR SUPPLIER San Pablo Healthcare & Wellness Center		STREET ADDRESS, CITY, STATE, ZIP CODE 13328 San Pablo Avenue San Pablo, CA 94806	

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 0947</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure nurse aides have the skills they need to care for residents, and give nurse aides education in dementia care and abuse prevention.</p> <p>42766</p> <p>Based on interview and record review, the facility failed to ensure that all registry employees were screened for background check and trained on abuse prevention when one registry Certified Nurse Assistant (CNA) 1 did not have a background check or abuse prevention training prior to taking care of residents in the facility.</p> <p>This failure had the potential to put residents at risk for injury or harm.</p> <p>Findings:</p> <p>During an interview on 6/20/24 at 10:40 a.m. with the Director of Nursing (DON), DON stated the staff that was involved in an alleged employee to resident abuse incident of Resident 1 on 4/6/24. The staff was a registry CNA (CNA 1). A request was made for the abuse prevention training and CNA certification for the CNA 1.</p> <p>During an interview on 6/20/24 at 1:10 p.m. with DON, DON stated the Staffing Coordinator (SC) was the one responsible for screening and checking the documents of registry staff. The facility did not produce the CNA certification or abuse training for CNA 1.</p> <p>During a telephone interview on 6/21/24 at 9:25 a.m. with SC, SC confirmed that she was the one in charge of screening and scheduling the registry CNAs. SC stated she did not check the required documents including in-service training and certification for CNA 1. SC stated she was supposed to check them prior to CNA 1 working in the facility.</p> <p>During a telephone interview on 6/21/24 at 12:58 p.m. with CNA 1, CNA 1 stated she worked with residents in the facility in April 2024 for one day. CNA 1 stated she did not receive the abuse prevention training from her agency or from the facility and she did not have a background check done by her agency.</p> <p>During a telephone interview on 6/21/24 at 2 p.m. with SC, SC stated the agency produced the CNA certification for CNA 1 but stated CNA 1 was not given any abuse training by the agency as their registry staff were required to do the training on their own.</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 0947</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a telephone interview on 6/21/24 at 4:45 p.m. with DON, DON acknowledged CNA 1 was not screened by staffing and did not have any abuse in-service training. DON stated they were supposed to ensure all the registry staff have an abuse in-service training.</p> <p>During a review of the facility's policy and procedure (P&P) titled Abuse - Prevention, Screening, & Training Program, dated July 2018, the P&P indicated, The facility conducts criminal background checks of applicants prior to hire ., the facility checks licensed and certified applicants for an active and unencumbered license or certification prior to hire . The facility requires individuals from registry, contracted, or temporary agencies, .to be subject to the same screening prior to placement in the facility. The facility either screens the individual itself or maintains screening documentation from the third-party agency .The facility conducts mandatory staff training programs during orientation, annually and as needed .</p>		