

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555777	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/02/2025
NAME OF PROVIDER OR SUPPLIER Bishop Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 151 Pioneer Lane Bishop, CA 93514	

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 - Many</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>45240</p> <p>Based on interview and record review, the facility failed to provide sufficient numbers of staff when 52 sampled days from October ' 2024 till March ' 2025 had less than 3.5 direct care service hours per patient day (DHPPD- the total number of hours worked per patient day divided by the average daily number of residents in the facility).</p> <p>This failure had the potential to result in unmet needs, such as psychosocial, physical needs, and safety concerns for 97 residents.</p> <p>Findings:</p> <p>During an interview with Certified Nurse Assistant 1 (CNA 1) on April 1, 2025, at 3:10 PM. CNA 1 stated we are unable to provide 1:1 care to one of our residents who wander off to other resident ' s room due to not having enough staff. We also have 2 CNA ' s that recently quit, and they have not found any replacement. CNA 1 also stated We recently had a meeting, and we were told by management that we are not using registry anymore. We have not had any registry in the facility.</p> <p>During an interview with Certified Nurse Assistant 2 (CNA 2) on April 1,2025 at 3:20 PM, CNA2 stated We are short staff on PM and NOC, especially when there ' s sick calls. We are short staff lately due to Travelers not working anymore and we also have 2 CNA that recently quit with no replacement at this time.</p> <p>During a concurrent interview and record review on April 1, 2025, at 3:45 PM, with the Acting Director of Nursing (DON), DON stated that we are still having issues with not enough staffing especially whenever we get sick calls. I ' m the MDS nurse, RN and now the acting DON because our current DON just resigned yesterday. When acting DON asked about the DHPPD hours below the minimum required hours. Acting DON stated that Director of Staff Developer (DSD), previous DON and Administrator (ADM) are aware.</p> <p>During record review on April 1, 2025, at 4:00 PM, with the Acting Director of Nursing (DON), the facility ' s policy and procedure (P&P), titled, Staffing, revised in April 2007, was reviewed. The P&P indicated, Our facility provides adequate staffing to meet needed care and services for our resident population. The acting DON stated the policy was not followed.</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 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>During a phone interview with DSD on April 1,2025 at 4:15 PM, DSD stated We are aware that our DHPPD hours are less that 3.5 hours especially on those days when staff calls off. We are in a Rural area and it ' s difficult to get staff. When DSD asked if the facility admitting residents with low staffing, and she stated that it is the ADM ' s decision.</p> <p>During record review of DHPPD hours on April 1,2025, at 4:30 PM, it indicated, the Actual DHPPD was less than 3.5 hours on the following dates, October 5,2024- 3.0, October 6, 2024- 3.39, October 12, 2024- 3.09 , October 13, 2024,-3.13, October 19, 2024- 3.17, October 20, 2024,-3.21, October 26, 202- 2.77, October 27, 2024- 2.82, November 02, 2024- 3.25, November 03, 2024- 3.33, November 9, 2024- 3.36, November 10, 2024- 2.61, November 16,2024- 3.00, November 17, 2024- 2.69, November 23, 2024- 3.23, November 24, 2024- 2.99, November 30, 2024- 3.05, December 07, 2024- 2.83, December 08,2024- 3.10, December 14, 2024- 2.45, December 15,2024- 3.06, December 21,2024- 3.42, December 22,2024- 3.36, December 28, 2024- 2.91, December 29,2024- 2.90, January 05,2024 - 3.00, January 18,2025- 3.16, January 25,2025- 3.06, January 26/2025- 2.91, February 01,2025- 3.22, February 09/2025- 3.23, February 15, 2025- 2.92, February 22,2025 2.90, February 23,2025- 3.19, March 01,2025 - 3.22, March 02,2025 - 2.67, March 08, 2025- 3.09, March 09,2025 - 3.09, March 13,2025 - 3.27, March 15,2025 - 2.16, March 16,2025 - 2.25, March 17,2025 - 3.02, March 18, 2025 - 3.25, March 19, 2025 2.85, March 20,2025 - 2.86, March 22,2025 - 2.47, March 23, 2025 - 2.41, March 25,2024 - 3.09, March 27/2025 - 2.86, March 28, 2025 - 2.48, March 29, 2025 - 2.23, March 30, 2025 - 2.95.</p> <p>During interview and record review of the document titled, Census and Direct Care Service Hours Per Patient Day with ADM on April 1,2025, at 6:00 PM, ADM acknowledged the facility did not meet the DHPPD required. ADM stated Yes, I ' m aware we are below the 3.5 minimum required hours. Since the beginning of 2025, we hired 6 RN ' s, 1 LVN ' s and 2 CNAs. We currently have 7 CNA ' s that are still doing their classes and Training. We are actively hiring to alleviate our staffing issues.</p> <p>During phone interview on April 14, 2025, at 10:32 AM, with the ADM, the facility ' s staffing waiver with a valid date of July 1, 2024, to June 30, 2025, which indicated, .2. The facility shall provide a minimum no less than 3.5 direct care service hours per patient day. 4. The facility shall employ, and schedule additional staff as needed to ensure quality resident care based on the needs of individual residents and to ensure compliance with all applicable state and federal staffing requirements . The ADM acknowledged the waiver was not followed during some days from October ' 2024 through March ' 2025 due to the DHPPD being below 3.5 . ADM stated we are working diligently in hiring Full Time staff so patient care is not affected and for the staff working to have enough help.</p>		