

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/10/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 053526	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/07/2010
NAME OF PROVIDER OR SUPPLIER SAN JOAQUIN GEN HOSP ESRD			STREET ADDRESS, CITY, STATE, ZIP CODE 7783 SOUTH FREEDOM ROAD (ESRD LOCATION) FRENCH CAMP, CA 95231	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
V 000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health during a COMPLAINT investigation. Complaint(s) number: CA00233170. The inspection was limited to the complaint and does not reflect the findings of a complete survey of the facility. Representing the California Department of Public Health: Juanita Glick, Health Facilities Evaluator Nurse.	V 000		
V 502	494.80(a)(1) PA-ASSESS CURRENT HEALTH STATUS/COMORBIDS The patient's comprehensive assessment must include, but is not limited to, the following: (1) Evaluation of current health status and medical condition, including co-morbid conditions. This STANDARD is not met as evidenced by: Based on staff interview, and document review, the facility failed to ensure that the patient's comprehensive assessment included a current history and physical by the physician for Patient 1, who was demonstrating paranoid (Characterized by unwarranted suspicion and thinking that others have evil motives) behaviors. Findings: On 6/22/10 the California Department of Public Health received a complaint with eleven allegations including that facility staff were tapping the complainant's phone, arranged a break in to	V 502		9/14/10

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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V 502	<p>Continued From page 1</p> <p>the complainants home, and that the treatment chairs had lasers in them.</p> <p>Review of Patient 1's record on 9/7/10 at 1:40 p.m., indicated that the patient had been receiving dialysis treatments at the facility for two years.</p> <p>Review of the Medical Social Worker's (MSW) note, dated 5/3/10, indicated that Patient 1 was accusing someone of changing his cell phone password without permission. The MSW documented that they advised the patient to call the phone company.</p> <p>Review of the MSW note dated 5/24/10, indicate that Patient 1 accused staff of getting into his bag in an attempt to get information about the him. The MSW documented that the patient appears paranoid, but doesn't feel there is a major problem. The MSW documented that she offered to put in a referral to mental health, but the patient declined the offer. The MSW documented that the patient denied having any thoughts of committing suicide or or hurting anyone else.</p> <p>Review of Administrative Staff A's documentation dated on 6/11/10, indicated that Patient 1 accused the administrator of sending two people to the his house, who hid in the cabinets and were digging tunnels under the house to get in. In addition, Patient 1 accused the physician of sending people to spy on him. Administrative Staff A documented that crisis intervention was called but could not see Patient 1 for 1 to 2 days.</p> <p>Review of the MSW documentation dated 6/11/10, indicated that Patient 1 denied having thoughts of hurting self or others and refused referral to mental health services.</p>	V 502			

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V 502	Continued From page 2 Review of the MSW note dated 6/23/10, indicated that the patient was feeling better, continued to deny having thoughts of hurting self or others and refused a mental health referral. Review of the MSW note dated 8/2/10, indicate that Patient 1 was using facility disinfectant solution (bleach) to wipe his skin excessively. When told that the solution was not to be applied to the skin the patient stated, "...They are giving me a virus here." The MSW indicated that Patient 1 had been having paranoid behaviors off and on and still refused mental health services. Review of the MSW note dated 8/18/10, indicated that Patient 1 still had some paranoid thoughts about the apartment manager going into his home and getting personal information. The patient repeated the behavior of cleaning everything excessively. When staff attempted to intervene the patient became upset and yelled at staff. Review of the progress notes dated 8/18/10, indicated that the patient scrubbed his vascular access site (Is the site on the arm where blood is removed and returned during dialysis) so hard that it began to ooze blood. Staff had some difficulty getting the patient to sit and get the site dressed. Patient 1's record lacked documented evidence that there was a current history and physical (H&P) with an assessment by the physician of the mental health status of the patient. During an interview on 9/7/10 Administrative Staff A stated that the Physician Assistant ([PA] is a	V 502			

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V 502	Continued From page 3 healthcare professional licensed to practice medicine with supervision of a licensed physician) who used to do the H&Ps was laid off as a cost saving measure and that the facility had been having some difficulty keeping up with the physical exams.	V 502			