

[REDACTED] Family Council Inquiry Form

The [REDACTED] Family Council ([REDACTED] Family Council) was formed pursuant to HSC 1569.158. This information is provided to the Facility Director, [REDACTED], in the absence of [REDACTED]. Council requests that a staff liaison be named as required in section (h): “ If a facility has a family council and a licensed capacity of 16 or more, the facility shall appoint a designated staff liaison who shall be responsible for providing assistance to the family council and responding to written requests that result from family council meetings. “

Please respond in writing within 14 calendar day to these requests consistent with the regulation as stated in section (f): If a family council submits written concerns or recommendations, the facility shall respond in writing regarding any action or inaction taken in response to the concerns or recommendations within 14 calendar days.

The [REDACTED] Family Council make the following requests for information and corrective action:

1. Dietary Concerns The Family Council observes, and receives feedback from residents regarding dietary issues on an ongoing basis.

Request: The Council requests that the Dietary Manager, [REDACTED], attend a meeting as a guest of the Council to discuss her area of responsibility; current facility policies and procedures that pertain to the dietary policy, including freshness and quality of supplies; and to address how family members may most effectively communicate issues in a timely manner.

Response: [REDACTED] **would be happy to attend a meeting as a guest of the Council, please send her an invite.**

2. Staffing, Adequate staffing, Staff training, Qualifications, and Expectations:

a. Family Council members have observed: insufficient caregiving staff; staff demonstrating they are not adequately trained; high turnover. Specific incidences include: A resident's family member found the resident in wet diapers with a dry diaper over the wet one. When they then began to change the resident, a caregiver came in and complained to management. Management notified the family member saying that they were interfering with the caregiver. Family member(s) have been informed they should come into the facility to give eye drops since staff couldn't verify if resident was getting them. Family members report finding wrong and mixed up clothing on residents. Beds not being made. Family members have found soiled clothing put back in with clean clothing, and informed management to no resolve. On at least three occasions, family member(s) have found resident's prescribed fortified drink sitting untouched and at room temperature, no assistance provided to resident. In SNF, multiple family members have found soiled "Depends" sitting on resident's nightstand or not disposed of properly.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items to satisfy residents and family members? Provide the [REDACTED] staffing ratio per shift and per all days in the Memory Unit and Assisted Living. Please identify each shift with the minimal levels of unshared workers who deliver service.

Do these staffing ratios meet or exceed regulations? Describe the method(s) used to fulfill the training requirements of regulations as cited in HSC 1626.626.

Response: We staff according to resident needs. When new staff are hired they are being trained per California regulations through on-line training and on-going staff in-services.

b. It is understood that there is currently no driver for the facility van.

Request: Provide the new Family Council Liaison name with contact information along with the person driving the residence van.

Response: There are 5 staff members who are able to drive the van. Any requests for transportation should go through the Concierge.

c. Staff are not cleaning rooms and other duties per the contracts and have advised individuals to pay for private personal care or telling private personnel to do ■■■ contracted work, such as aid showers, pick up dining room menus and deliver food to rooms.

Request: What is ■■■'s related policy(ies) to this/these items and related cleaning items along with apartment/room cleaning schedules? What is the plan and timing to train staff in the contracted duties for each resident, plus returning to meeting the agreed contracts and related room cleaning and support?

Response: Housekeeping and laundry staffing are sufficient to clean resident apartments per their scheduled day.

d. FC members report that caregivers many times only speak Spanish with each other during residents' showers and other activities involving residents, which confuses residents and do not allow residents to understand what is going on in their activity or feel a part of the activity. This is in violation of Residents' Rights and unacceptable practice and should be addressed in staff training.

Request: What is ■■■'s related policy(ies) to this/these items and related items. Provide plan and schedule for training staff on Residents Rights, especially regarding dignity and respect.

Response: All staff are given training on Resident Rights and Elder Abuse when they are first hired and a monthly in-service may include that as well.

e. Staff continue to demonstrate a lack of training and adherence to important procedures.

Request: Provide current plan and schedule for supporting required training.

Response: Direct Care staff must complete 20 hours of California Direct Care Orientation Training when they are hired before working with residents and an additional 20 hours within the first 4 weeks of employment. They must also attend monthly in-service training.

f. ■■■-FC would again like to illustrate the critical importance of appropriate training in transfer techniques. It has been identified that all staff are not equally trained and fail to be

able to transfer thereby endangering the health and safety of the residents, including the unique needs of special residents.

Request: Please specify how staff members trained in the specific needs of individual residents. Provide current plan and schedule for supporting required training ensuring the collective and individual residence needs.

Response: Hands on skills training is conducted as part of initial training and through in-services with Home Health and Hospice agencies as needed.

3. ACTIVITIES:

Family Council members are acutely aware of the effects of extended social isolation of residents and the lack of [REDACTED] indoor and outdoor activities plus lack physical exercise. A large number of family members have raised the issue of lack of indoor and outdoor and offsite activities. There are still relatively few activities, such as bingo or exercise or singing or crafts or outdoor activities.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items? Provide the corrective solution and completion plan with date for when this will be completed.

Response: As COVID restrictions are lifted we will be able to offer more activities.

Request: FC invites new Activities Director to one of its regularly scheduled meetings. Provide plans and schedule for returning to providing fully scheduled activities for all units as provided in 2019 and prior years, with hand delivered notification to residents (plus email where requested), and emailed notification to family members and posted schedules within the facilities.

Response: As COVID restrictions are lifted we will be able to offer more activities. The daily and monthly activity schedules are posted and residents receive monthly newsletters.

4. COMMUNICATIONS:

a. Phone Calls -Unanswered:

Family members calling and emailing facility for information or assistance frequently find that their communications are not responded to by administrative staff.

[REDACTED]'s verbalized protocol is that outside phone calls will be answered by Skilled Nursing and then transferred to the required location in off normal hours including all weekends. Many calls intended for Assisted Living or Memory Care are not answered in Skilled Nursing after 5pm and on weekends and many answered calls are then dropped during the transfer from Skilled Nursing to Assisted Living/Memory Care, with no one answering phone when one calls back immediately to try again.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items, and what are the planned corrective action(s) that are being done to correct this long-standing issue. Are there alternate forms of communication when a resident needs assistance and there is no response or a delayed response?

Response: All phone calls and emails are triaged for emergencies and then answered in order of receipt. There are three separate levels of care: Skilled Nursing, Memory Care and Assisted Living. Phone calls and emails will be addressed by the appropriate manager from each department. For example, Skilled Nursing will not address any family or resident concerns for Assisted Living or any other department that is not Skilled Nursing. When there is a manager on duty for the weekends, that manager will address any immediate family or resident emergency. All other concerns will be addressed by the appropriate department manager during regular office hours.

b. Multiple residents/family members are finding that management and staff are not informing Family or POAs of resident change in status/condition promptly. This has included not calling family members or patient advocates sometimes for 6 hours or one day and sometimes not delivered at all, with important medical information such as injuries, shower falls, slips and trips to the hospital or emergency department.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items? Provide operations plan relationship and provide the reasons and corrective action plans for the above.

Response: Changes in resident conditions are addressed timely to families and physicians. Please inform the facility of any changes/updates in contact information (telephone numbers and mailing addresses).

c. [REDACTED] families historically received regular and timely email communication from the Executive Director in 2020 and earlier years regarding facility information of interest and necessity (eg. normal operations, staff changes, events, COVID, visitation, etc.). There is predominantly no communication from the new Executive Director and there has been near zero from any management since the former Executive Director left in October 2020. The Executive Director, [REDACTED], verbally and in writing agreed to provide regular informative facility updates to all residents and family advocates as was done by prior management but this has not been done as promised. Not all residents and family members are on [REDACTED]'s email list.

Request: Provide FC with [REDACTED]'s related policy(ies) re communication with community (residents and their families/RPs). Provide regular periodic communications from facility administration to residents, families and responsible parties. Define frequency and method of communication going forward so recipients know what to expect.

Response: The Executive Director will inform families and responsible parties via telephone call or email on a weekly basis, regarding facility COVID-19 updates and restrictions. Weekly updates are only for COVID-19 updates. If there are no facility COVID-19 exposures or outbreaks, there will be no weekly updates. Please inform the facility of any changes/updates in contact information (telephone numbers and mailing addresses).

Request: Facility management confirm that the email list serve is accurate and complete, including resident addresses on an ongoing basis by assigned staff. The critical importance of this extends to emergency protocols.

Response: Concierge will update information as needed. Any changes should be brought to their attention.

Request: Provide the agreed upon facility updates, including recent menus and activity plans in regular informative communications to all residents, family members and responsible parties.

Response: Copies of menus and activity calendars are given to residents. Families can pick up their own copy when they come visit or can be sent by email upon request. Activity Calendars are also located on the website.

d. Due to staff changes, family advocates/family members are unsure who to contact for specific issues and needs. These include: the Family Council Liaison, newest Nursing Directors, Maintenance personnel and Activities Director.

Request: Please provide a Facility Organization Chart with contact Email and Phone Number contacts to all residents, family members and/or family/resident advocates. Please introduce new facility staff members to all residents and also family members by email when hired.

Response: Changes happen, and so for consistency, questions about who to contact can be directed to the Concierge.

e. Pursuant to HSC 1569.158 (g) (1) If a facility has a family council, the facility shall include notice of the family council and its meetings to family members and resident representatives in routine mailings and shall inform family members and resident representatives of new and current residents who are identified on the admissions agreement during the admissions process or in the resident's records, of the existence of the family council, the time and place of meetings of the family council, and the name of the family council representative.

█ still has not directly notified the residents and family advocates/family members that a Family Council exists.

Request: Review Operations Plan relationship to the requirement and provide the corrective action plans for posting and notifying all residents, plus family members and resident representatives by email of the above Family Council existence with methods to contact the Ombudsman for reaching the Family Council.

Response: Please provide the time and place of meetings of the family council, and the name of the family council representative so that the facility can better inform family members and resident representatives of new and current residents of the existence of the family council and its meetings.

f. Residents and family advocates/family members have not been provided a grievance process for all facilities as required by state regulations.

Request: Provide the required grievance process for all facilities as required by state regulations.

Response: Resident and family members are provided a grievance process upon move in.

g. Residents and family advocates/family members have not been provided the Emergency Plan, Evacuation/general emergency process/procedure & training plans as requested by

several family members.

Request: Provide the requested Emergency Plan, Evacuation / general emergency process/procedure & training plans to all residents, family members and patient advocates.

Response: The Emergency Plan is posted in the lobby.

h. It is clear that the Assisted Living facility and Memory Care has lost a great number of residents since March 2021. Additionally, there are and have been a number of family members and resident's concerns since March 2021 that current [REDACTED] management is actively reducing the facility numbers or does not care about the residents or family members concerns from the minimal response to residents and family members complaints and concerns for service and operations.

i. Additionally, a number of staff and family members believe that the gardener is no longer employed and that the property growth plan is to remove some or all of the gardens.

Request: What is [REDACTED]'s and related Senior Management plan for the Assisted Living facility over the next two years for the property as a whole with layout and city planning approval map and timelines for existing and any future construction or remodeling completion. What is [REDACTED]'s and related Senior Management's plan to regain the resident's and family member's acceptance?

Response: An additional much needed Memory Care cottage and parking lot are in the construction phase. Garden areas are being cleaned up of debris and weeds.

5. MEDICATIONS DELIVERY:

Multiple members and residents expressed concerns regarding residents' medications running out and/or not being filled in a timely manner. One incident resulted in the family needing to take the resident to the doctor to have the prescription filled. In some cases, medications have been delivered late to residents on weekends when only one Medtech was on duty. It has been seen that medications have in some cases been delivered by non Medtech licensed individuals.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items? Provide the reasons and corrective action plans for the above.

Response: Med Techs follow a consistent workflow to ensure medication orders and MARs are up to date and refills are received in a timely manner. Medications may be given up to one hour before or up to one hour after the prescribed time to accommodate resident schedules, unless otherwise indicated by the physician.

6. [REDACTED] Management Verbal Contacts to Doctors, Residents and Family Members: [REDACTED] Facility Management are contacting doctors without respective family members or patient advocate (i.e. family or POA) notice or approval to ask if certain residents are qualified/candidates to move to Skilled Nursing.

[REDACTED] Facility Management are contacting doctors without respective patient advocate (i.e. family or POA) notice or approval to ask if new forms of medication should be prescribed.

Residents are being verbally told they are appropriate for Skilled Nursing without notice to the respective patient advocate (i.e. family or POA) notice.

█ Facility Management are verbally contacting family members and/or related POAs that the resident needs to move to another non-█ facility or be put in █ Skilled Nursing in short term periods such as 30 days.

Request: What is █s related policy(ies) to this/these items and related items? Provide █ Operations Plan and authority and California State guidelines supporting the above █ Management methods and/or state █ Management and Facility policies surrounding all above topics.

Response: All higher level of care decisions are discussed with family or POA. Care Conferences are done every 6 months or upon change of condition.

7. FINANCIAL:

a. Financial billing, invoicing and insurance invoicing have not being completed (or on time), reflect incorrect late fees, and# End of Year 2020 statements for tax filing are not provided, placing families in financial stress and debt. Rate increase notices were not delivered to many residents and related family members, thereby not supporting the enforced rate increase. Families and Resident POAs are not receiving statements to their separate personal addresses so that they may manage the invoices. █ Staff admit to the problems and say not to worry for now without providing a solution.

Request: What is █s related policy(ies) to this/these items and related items? Provide the corrective solution and completion plan with date for when this will be completed.

Response: Statements are sent to the address on file. Families can verify and update as needed. We have no way of sending out tax statements, but will provide a resident ledger on request.

b. It is understood that some people have been not able to receive financial recovery of lost articles, such as hearing aids and that some items have gone non-refunded by █ management for over three weeks. This is an extremely long time for someone needing hearing aids to survive without support, not to mention the time required after financial recovery for ordering/receiving new units.

Request: What is █s related policy(ies) to this/these items and any related items? What is the time one must wait for return of property or repayment by █? How is █ resolving the most recent lost hearing aids issue?

Response: If any loss or damage of any personal property was caused by our negligence or that of our employees we will replace it.

8. MAINTENANCE:

a. Lack of Maintenance support to residents: █ has not and is not responding to maintenance requests in residence rooms for several months.

Request: Who is the maintenance contact, phone and email address? What is [REDACTED]'s related policy(ies) to this/these items and related items. How can [REDACTED] provide the required maintenance assistance as provided in prior years and how do they intend to start notifying those residents and family members requesting maintenance?

Response: Any work order requests should be emailed or called in to the Concierge. The Concierge will make a work order ticket to give to maintenance. This allows us to keep track of repairs.

b. The [REDACTED] phone system frequently breaks and outside callers cannot reach the facility, sometimes for days. Calls to reach the facility on the main number at hours after 5pm and sometimes during day hours go to Skilled Nursing and Skilled Nursing cannot transfer the call to the required location such as Assisted Living to reach required care support.

Request: What is the plan to update the system to fully operational standards with an ability to reach required care support any time of the day?

Response: The phone system is antiquated. We have a vendor we are working with to get this updated.

c. The Skilled Nursing electronic/electrical call-bell system has been in full failure for many months with many reports of residence yelling for help and not being supported. It is rumored that the system has been fixed after a long and stressing period to residents and family members.

Request: What has been taking so long to repair this highly important system? Who within management is responsible for the repairs? What was the total time the system was none operational and when was it returned to being fully operational? What is [REDACTED]'s facility and management's policy for repair of important systems such as this? Is this system now fully operational?

Response: The system is fully functional and any repairs get done timely.

9. TRANSPORTATION:

Lack of transportation continues to be an issue, leaving residents stranded, and families needing to take residents to their appointments; Skilled Nursing is required to have transportation available. The [REDACTED] Van Lift is and has been broken for several months, with no known plan for correction.

Request: What is [REDACTED]'s related policy(ies) to this/these items and related items? Provide the reasons and corrective action plans for the above.

Response: In following regulation, we make arrangements for transportation and these arrangements are typically made through resident's insurance company.

Sincerely,

- [REDACTED] Family Council Representatives
Please provide response to [REDACTED] Family Council per California State Regulations at the
following Email address: [REDACTED]

Copies have been provided to:
Community Care Licensing and to the CA Department of Public Health Licensing Division.