



California
Department of
Health Services

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State of California—Health and Human Services Agency
Department of Health Services



ARNOLD SCHWARZENEGGER
Governor

March 6, 2006

DOM 05-21

To: ALL DISTRICT MANAGERS/ADMINISTRATORS

Subject: DATA PROTECTION PROCEDURE TO EVALUATE COMPLIANCE
WITH HSC 1276.5 AS MANDATE BY AB 1629 to BEGIN SOON

In compliance with Welfare and Institutions Code Section 14126.033 (Assembly Bill 1629, Frommer, Chapter 875, Statutes of 2004), the California Department of Health Services (CDHS) Licensing and Certification program (L&C) will soon begin sending staff into the field to collect data from all freestanding skilled nursing facilities (SNFs) in order to calculate compliance with the 3.2 nursing hours per patient day (nhppd) staffing ratio mandated by Section 1276.5 of the California Health and Safety Code. The monitoring visits will begin soon and continue through 2006, and they will be unannounced. CDHS L&C will, however, notify providers of the two to three week window when they can expect a visit. We expect the monitoring visits to last approximately one day, depending on the size of the facility.

AB 1629 specifically exempts from these visits the following nursing facilities:

- Those that are part of a continuing care retirement community
- Distinct parts (D/P SNFs) of a licensed general acute care hospital
- State of California or another public entity-owned

Exempt facilities will not be visited. Also, facilities whose population is comprised entirely of residents receiving Special Treatment Program services will not be visited because the staffing requirements differ. However, skilled nursing facilities in which only some residents receive Special Treatment Program services will be visited.

Staff who will be making these monitoring visits will be Associate Government Program Analysts (AGPAs) hired specifically for this purpose. We will house one AGPA in each of the following District Offices: Santa Rosa, San Bernardino, Fresno, and San Jose. There will be two AGPAs assigned to the Los Angeles area. There may be an additional AGPA hired for southern California.

AB 1629 requires CDHS L&C to report to the Legislature the number and percent of SNFs that complied with the minimum staffing requirement during each patient day for

the three years immediately preceding the implementation of the new law. Therefore, during the visits, facilities will be required to make available to CDHS L&C staff payroll March 6, 2006 records documenting nurse staffing hours as well as patient census records for the period beginning July 1, 2002 through June 30, 2005. If that information is retained in a location other than the facility, facilities are being requested to notify CDHS L&C where the payroll data may be obtained. L&C staff will review payroll data at corporate headquarters or at facilities, whichever location is more convenient for providers. The bulk of this information should be readily available, as all employers are required to retain payroll information for a minimum of three years either at the place of employment or at a central location within the State of California in accord with section 226(a) of the California Labor Code.

Staff will be equipped with a laptop computer and a portable printer. They will need to have access to either a live telephone line or a digital subscriber line (DSL) while in the facility or at the corporate headquarters in order to access the database, which is housed on the CDHS network. The number they will dial is our toll free number, so there will not be any charge to the facility.

If CDHS L&C staff finds that a facility was not in compliance with the mandated 3.2 nursing hours per patient day for any of the days calculated, staff will issue the facility a deficiency at the end of the visit and the facility will be responsible for submitting a plan of correction to its local district office. The AGPAs will have 2567s loaded into their computers so that all they will have to do is type in the dates of non-compliance and the actual calculated nursing hours per patient day. They will then print it out and have the facility administrator/designee sign and date it. (In the event that the facility is compliant with the 3.2 nhppd on all sampled dates, the facility will be given a 2567 documenting the compliance.) The original 2567 with the administrator's signature will be turned in to the district office with oversight responsibility for that facility. Staff will notify the District Office Administrators and Managers via e-mail when a facility visit has been completed and the 2567 is entered into the computer. District Administrators and Managers are responsible for reviewing the 2567s to determine if any additional concerns are raised by:

- the degree of non-compliance with the minimum staffing standard, or
- a downward trend in staffing.

If during the course of the staff's visits they notice any possible instances of abuse or neglect, staff will follow L&C's policy and procedure for reporting. If staff notices other adverse events or problems that cause them to be concerned about the health and safety of residents, staff will fill out the complaint intake form loaded into their computers

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and submit it to the appropriate district office. Staff may also contact the district office directly to notify the supervisor for the facility of a problem if the situation is egregious. It will be the responsibility of the district office to follow L&C's policies and procedures for the processing of complaints. If you have any questions about these monitoring visits, you may contact Gina Henning of my staff at (916) 552-9370. We appreciate your participation and cooperation with this process.

Sincerely,

Brenda G. Klutz
Deputy Director