If Information is Power, Assisted Living Residents are Powerless.

When Lorchid Macri was searching for an assisted living placement for her 91 year-old mother, she was faced with a dilemma. She saw the marketing materials touting wonderful care in idyllic settings. She heard from admissions coordinators who raved about the quality care her mother would receive. But she was unable to find whether the facility had a record of enforcement action by the state. Even an internet search, the vaunted tool for accessing all modern information and consumer empowerment, yielded nothing.

Enforcement actions and complaint and survey information about Residential Care Facilities for the Elderly (RCFEs – also called assisted living facilities) in California are not posted on the internet nor otherwise made widely available to potential residents or their family members who wish to learn more about whether a facility has a history of poor care. The Department of Social Services’ Community Care Licensing Division (CCL), charged with monitoring RCFEs has a “my ccl” website (http://www.myccl.ca.gov/). Under the link “find licensed care,” one can enter a facility name and then learn the facility’s licensure status and some contact information. That’s it.

The only way a person can see a facility’s enforcement file is to physically travel to the local CCL district office and ask for it. For potential residents who are often medically frail or have cognitive disabilities, or their family members who need to find a placement quickly, traveling to a district office is likely challenging. For family members who live out of state, traveling to a district office is not practical.

Having personally observed the challenge of finding good information about RCFEs as she researched public records for work pursuing her Master’s degree in gerontology, Chris Murphy was inspired to make the information truly public – by posting it to a website for anyone to access. In her research, Chris recognized the process for requesting and obtaining the public documents for any given RCFE was cumbersome and lengthy. She also found the file documents to be unfamiliar, out of context and therefore, difficult to understand. Having been through the process of placing her mother in a local RCFE several years earlier, she realized that if she had access to the information she was seeing in the public file, her placement decision may have been different.

Obtaining, scanning, and posting every public file for California’s 8,000 RCFEs proved daunting for Chris and her limited resources, so she limited her postings to San Diego and Imperial County facilities. The public file excerpts Chris has made available are one of the cornerstones of her organization, California Advocates for RCFE Reform (CARR) and its website, www.rcfereform.org.

For family members of potential RCFE residents like Lorchid Macri, the inability to research potential facilities is very disappointing, particularly after making the gut-wrenching decision to place a loved one’s care with strangers. Compounding the lack of information is the fact that her mother lacked the capacity to report on the quality of her care herself. As an out-of-state resident, Lorched was unable to go to a local CCL office to see facility files had she even known that she had that option.

Information is Power .................. (continued on page 11)
CANHR Grows in the South

CANHR is pleased to announce the opening of an expanded southern California office in South Pasadena. The new location will provide CANHR the opportunity to do more outreach, education and advocacy throughout the state.

With a larger staff to serve the long term care community and a greater presence in the southern part of the state, CANHR will be able to provide even more presentations, have more staff to assist with consumer calls and questions, attend local events, encourage family councils, and support our fellow advocates and legal service programs in the greater Los Angeles area.

A special thanks to all the hard working individuals who helped to get the new office up and running!

United Way Workplace Giving

Just a reminder, for those of you who are making donations through United Way, California Advocates for Nursing Home Reform is participating as a “non-affiliated beneficiary agency” in the United Way Work Place Giving Campaign for 2012. As A Certified Community Campaign Agency we are participating in:

- The Bay Area Community Campaign (#151)
- The California State Employees Charitable Giving Campaign (#151)
- The Combined Federal Campaign (#6010)

Consider CANHR when making a charitable contribution through payroll deductions and support CANHR services. A full description of CANHR services is available at www.canhr.org.

Thank you:

We want to thank everyone who contributed money, time and/or resources to CANHR throughout the year. A very special “thank you” to those of you who contributed to our trainings and newsletters. We could not do our work without your support!

Happy Holidays!

Warmest wishes for a happy holiday season and a great new year from the staff at CANHR!
A sucker is born every minute and a new scam every day.

CANHR has been receiving an increasing number of reports of life insurance agents and mortgage brokers going into business as tax preparers in order to establish trust and gain access to elders’ financial information. They leverage that trust to convince elders they should buy deferred annuities and reverse mortgages. This is a spin-off of the old trust mill scam. In trust mills, the living trust was used as bait. Now, instead of peddling living trusts, these financial predators are peddling tax preparation services, often at cut-rate prices that are attractive to elders with limited liquid assets.

Some tax predators are licensed Certified Public Accountants (CPAs), while others are enrolled agents. Enrolled agents are licensed tax professionals who must pass a test and earn continuing education credits in order to represent clients before the IRS. Still, some tax predators have no training in tax preparation whatsoever.

It’s important to note that while the IRS changed its rules last year to require that anyone who charges a fee for tax preparation register with the IRS, it did not institute a ban on the cross selling of financial products such as annuities and mortgages to customers. The new rules also do not address tax advisors who do not charge a fee for the tax preparation itself because they know they will make high commissions on financial products later sold to the elders.

Here is an actual advertisement that went out to life insurance agents promoting a tax prospecting sales package:

**Examples of Tax Prospecting**

Council on Aging Silicon Valley received a call from an elder who purchased a reverse mortgage because his tax advisor recommended it. His tax advisor also happened to be a reverse mortgage broker. The elder trusted his advice because of the pre-established professional relationship. The tax advisor made a little money from the tax preparation service he provided and a LOT of money from the commission generated by the sale of the reverse mortgage.

Earlier this year in Auburn, an 84-year-old woman sued her tax advisor for elder financial abuse and unfair business practices when he placed $1.5 million of her money into an investment fund that he controlled and then stopped making the guaranteed payments.

In Michigan, a tax preparer was charged with 11 felonies for stealing $1 million from his elderly clients. He allegedly coaxed his victims into investing money in a real estate scheme, only to gamble all of their money away in Detroit casinos.

**What Can We Do? Who Can Elders Trust?**

For the low wealth elder, the Volunteer Income Tax Assistance (VITA) program is a terrific resource. Anyone who makes $50,000 or less in yearly income and requires assistance in preparing their tax returns qualifies for this program, in which IRS-certified volunteers provide free income tax preparation. Additionally, the Tax Counseling for the Elderly (TCE) program provides free priority assistance to elders over 60 who require help preparing their taxes. Volunteers with the TCE program can also answer questions about pensions and retirement accounts. To locate a VITA or TCE site near you, call the IRS helpline at 1-800-906-9887.

For higher wealth elders in need of more complex tax preparation or planning, a CPA, Certified Financial Planner, or estate planning attorney may be a better choice. However, before hiring any professional to do their taxes, elders should first check to make sure that the tax professional is not licensed to sell life insurance or mortgages. Elders can do this by entering the tax advisor’s name into the licensee databases provided on the California Department of Insurance, Department of Real Estate, and Department of Corporations websites. For more information on how to protect against investment fraud, see Seniors Against Investment Fraud’s page on the California Department of Corporations website: http://www.corp.ca.gov/Consumer/SAIF/Default.asp

One final word of advice: Elders should NEVER rely on tax advisors to do their estate planning or Medi-Cal planning. CANHR’s State Bar-approved attorney referral service can provide elders with attorneys who specialize in this type of legal planning.

As tax season approaches, the financial predators will be coming out in full force. A word to the wise: stay vigilant. There is always another scam just around the corner.
Community Care Licensing Inspectors Accused of Taking Bribes

Three Community Care Licensing inspectors were fired by the California Department of Social Services after they were accused of taking thousands of dollars in bribes from operators of local residential care facilities for the elderly (RCFEs). According to a special CBS 8 report in San Diego, the inspectors worked at the offices of Community Care Licensing in Mission Valley. They are identified in court documents as Conchita Valero, Lydia Williams and Christina Nepomuceno. The employees held the job title Licensing Program Analyst (LPA) and, as such, they inspected and licensed assisted living homes for the elderly (RCFEs) in San Diego County.

Iris Ramirez runs four senior care homes in Mira Mesa under the name Ambassador Senior Retreat. A search warrant obtained by CBS 8 alleges Ramirez bought airline tickets to fly LPA Valero and LPA Williams to the Philippines for a vacation, and also gave Valero $2,800 in cash. In exchange, Ramirez’s licenses were fast tracked and “completed in two months or less” instead of the average “five to six months,” according to the warrant. “Ramirez admitted to paying LPA Valero $2,800 cash and that LPA Valero was ‘probably’ not documenting deficiencies at the facilities in exchange for the money,” according to the warrant.

Also named in the search warrant is the Eternal Sunshine Care assisted living facility on Quince Street in San Diego’s Oak Park neighborhood, owned by Selma Teer, 36. The search warrant claims Teer had purchased a home in Mira Mesa that she hoped to license as a Community Care facility; and gave LPA Nepomuceno $3,000 in cash. The search warrant also names Happy World residential care facility in Poway, once run by 56-year-old Maria Blume; and the Golden Touch III facility in Mira Mesa, formerly operated by Blume’s nephew, who gave LPA Williams $5,000 in 2009, according to the records.

A spokesperson for the California Department of Social Services declined to comment on the ongoing investigation but did confirm the employees in question are no longer on the payroll. At this point, it is unsure as to whether the Attorney General’s office will be involved. It is hoped, however, that these “inspectors” will be indicted, along with the RCFE owners, and that the licenses of the owners will be terminated. Unfortunately, bribery and deceit in the long term care industry and in the oversight agencies is becoming business as usual.

Lawsuit Settlement will Improve Medicare Coverage

The October settlement of a groundbreaking class action lawsuit against Medicare should provide substantial relief to Medicare beneficiaries who need skilled nursing or therapy services at home, in a nursing home, or in an outpatient setting. For decades, Medicare beneficiaries who needed these services have been illegally denied coverage on the basis that their conditions were not improving.

The Center for Medicare Advocacy and Vermont Legal Aid filed the lawsuit, Jimmo v. Sebelius in January 2011, resulting in a tentative settlement that was filed in federal District Court on October 16, 2012. When the judge approves the proposed agreement, CMS will revise its Medicare manuals to correct suggestions that Medicare coverage is dependent on a beneficiary “improving.” New policy provisions will state that skilled nursing and therapy services necessary to maintain a person’s condition are covered by Medicare.

Although Medicare law has never required a beneficiary’s condition to improve to qualify for these services, you would never know it from the way Medicare has administered the law. Countless beneficiaries have been denied coverage or had coverage cut short due to the so-called “Improvement Standard.” The subversion of federal law has hit persons with chronic health conditions the hardest because, for them, improvement is often out of reach.

Under the agreement, Medicare will pay for skilled nursing and therapy services if they are needed to “maintain the patient’s current condition or prevent or slow further deterioration,” regardless of whether the patient’s condition is expected to improve.

Part of the settlement requires the federal Centers for Medicare & Medicaid Services (CMS) to undertake a comprehensive educational campaign to inform health care providers, Medicare contractors, and Medicare adjudicators that they should not limit Medicare coverage only to beneficiaries who have the potential for improvement. Instead, providers, contractors, and adjudicators must recognize “maintenance” coverage and make decisions based on whether a beneficiary needs skilled care that must be performed or supervised by a professional nurse or therapist. Jimmo will be certified as a nationwide class.
Although it may take months before the court approves the settlement agreement, the Center for Medicare Advocacy contends that health care providers should implement the standards in the settlement agreement now. CMS has acknowledged the settlement does not change the underlying Medicare law or regulations, which are the standards that should be used to assess claims, rather than the discredited “Improvement Standard.”

The Center for Medicare Advocacy has posted detailed information on the settlement at: http://www.medicareadvocacy.org/hidden/highlight-improvement-standard/

CANHR congratulates the Center for Medicare Advocacy and Vermont Legal Aid for this historic victory.

**U.S. Senators Kohl, Grassley and Blumenthal Introduce Bill to Strengthen Informed Consent for Antipsychotics in Nursing Homes.**

On September 21st, Senators Kohl, Grassley and Blumenthal introduced the Improving Dementia Care Treatment in Older Adults Act (S. 3604) in response to increased reports of epidemic misuse of antipsychotics to chemically restrain nursing home residents with dementia. In doing so, they seized the opportunity to address this public health crisis straight on.

In their press release on the bill’s introduction, Senator Blumenthal best described why the bill is needed: “Excessive prescription of antipsychotic drugs in nursing homes is elder abuse – plain and simple. It is chemical restraint, as pernicious and predatory as unnecessary physical restraint. While these drugs have warnings against using them for patients with dementia, an alarming majority of claims are for patients with dementia.”

The centerpiece of S.3604 is standardizing the process of obtaining informed consent when an antipsychotic is proposed for a nursing home resident with dementia. The process would require an explanation of side effects and risks, including the mention of any “black box warning” labels mandated by the FDA. Antipsychotics are required to have labels warning that they nearly double the risk of death for elderly people with dementia but these warnings are rarely seen or communicated to nursing home residents or their representatives. The bill also requires facilities to inform residents or their decision-makers of non-drugging options for treatment.

Informed consent is the best safety net for preventing the misuse of antipsychotics for nursing home residents with dementia. Giving residents and their decision-makers good information about risks, benefits, and alternatives to antipsychotics enables them to reject inappropriate medications and to help design superior care plans. Informed consent puts the power to make key health care decisions in the hands of residents where it belongs.

S.3604 is pending in the Senate Finance Committee, which may take up the bill before the end of the year.

Join CANHR in supporting this important bill by getting out word on it and by urging Senators Dianne Feinstein and Barbara Boxer to support it when it reaches them. Check the main CANHR website and the CANHR Stop Drugging website for updates and information on how to help. www.canhr.org/stop-drugging/

**Taxes & Long Term Care Costs**

Medical expenses incurred by a taxpayer, his/her spouse and dependents are deductible to the extent that they exceed 7.5% of adjusted gross income. Many relatives of long term care consumers are concerned about the high costs of nursing home care or assisted living care and wonder if these costs are deductible. Here are some general rules:

- Generally, the full costs of nursing home care are deductible, since the receipt of medical care is the principal reason for the person being in the facility.

- If receipt of medical care is not the principal reason for residing in a facility, only the actual costs of medical care are deductible – not the meals and lodging. (There are exceptions to this as well.)

- Costs for home care are also deductible, even if an unlicensed individual renders the services, but only that portion of the expenses attributable to rendering medical services, i.e., bathing, grooming, administering medications, is deductible.

The extent to which the costs of care can be deducted are determined on a case by case basis, and you should always consult a tax expert.
Suggested Gifts for Long Term Care Residents

It’s the holiday season again and, as you make out your shopping list, we have some suggestions for possible gifts for a special long term care resident:

- A new pair of comfortable slippers or robe in a favorite color.
- Purchase a gift certificate for a haircut, massage or manicure and pedicure. Treat yourself and go with the resident.
- Pictures taken in the last year of friends and family, arranged in an album, frame or on a bulletin board to hang up.
- Send along a calendar with important dates, such as birthdays and anniversaries. Select some cards and provide stamps for the resident to send.
- Bring a videotape/dvd to enjoy together at the facility. Record a family event, such as a baptism or a graduation for the resident to share in the celebration.
- Subscribe to a hometown newspaper or a favorite magazine.
- Crossword or word search books – in large print if need be.
- A television for the resident’s room, or wireless headphones to hear the television.
- A favorite book, books on CD/tape or a wireless reading device.
- Brighten up the resident’s room with a quilt or lap blanket. Bring in a plant or have flowers delivered on a regular basis.
- If the resident is in a wheelchair or uses a walker, find a tote bag that can attach to it.
- Check with the nursing home staff about other appropriate items, such as powder, lotion, toothpaste, soap, aftershave, etc.
- One of the best gifts for a nursing home resident, of course, is the gift of your visits.

Happy Holidays!
Starting a Family Council

When Elizabeth Yeh worked as a Long Term Care Ombudsman, she helped start a family council in the nursing home she served. She found CANHR’s material on how to start a Family Council in a SNF very helpful. Here’s a brief summary of what she did.

After Ms. Yeh got to know all the residents and their family members, one of the family members who had an on-going, unsolved problem with the facility stated that some other family members also ran into the same situations. “This was my opportunity to say: why not get together and form a family council?” Ms. Yeh volunteered to act as the liaison between the family council and the facility’s administration. She asked several families to set up a date, time and place for the first meeting, then approached the administrator, who offered to put up an announcement on their front door to notify all families.

“We held our first meeting in the facility with 3 families attending. They elected a temporary president, a vice-president and asked me to act as the secretary/liaison. Gradually, more family members attended.” She reports that at the third meeting, the convening place was relocated to the Yolo county social service department and there was a good turnout of families. Problems were identified and given to Administrator for him to reply in writing within 10 days. The response letter from the Administrator was then presented and discussed at the next meeting, and accepted or to sent back for clarification or a more meaningful response. This process of written requests and critical review and discussion of administration responses developed into some fruitful exchanges. For subsequent meetings, the members decided to invite department heads to come to talk to them.

Ms. Yeh reports that some of the activities-of-daily-living problems decreased and that residents’ quality of life and care also improved. “As for me as an Ombudsman, my caseload decreased as family members became more empowered and effective in their own advocacy.”

You don’t have to be an Ombudsman to start a family council but an Ombudsman can be a good resource for any family council by offering support and providing information and education on resident rights. Contact the Ombudsman assigned to the facility where your loved one lives and ask how they can help either start or sustain your Family Council.

Sustaining Family Councils

Colleen Adams, featured in the Winter 2011 edition of The Advocate, has been involved with Family Councils since 1998. She has taken on about every care issue that residents face. Over these 14 years, she has also learned a thing or two about organizing and sustaining Family Councils.

In a recent interview, Ms. Adams said that one of the most important things is to try to get the administrator to work with the Family Council. She offered this reflection: “Find areas of mutual concern, e.g. complaints of serving cold food, and come up with shared solutions. Also remind the administrator of past successes when working together to solve new problems.”

An on-going challenge is recruiting new members as people come and go from the Family Council. Colleen passes out Family Council brochures to family and friends of new residents, often times by handing them out room to room. Besides maintaining an informative bulletin board with take away materials (e.g. Family Council brochure, resident rights, etc.), she creates five feet long banners announcing special speakers for upcoming family council meetings that really get people’s attention. The facility also sends out notices of family council meetings in the monthly billing.

In this facility, the Family Council has created a “buddy system” where members look in on one another’s loved ones, especially when family members are away. These acts of kindness are real demonstrations of support and solidarity. As one of the Family Council members said, “It gives me peace of mind when I have to go on a trip knowing that someone from the Family Council is looking in on my spouse.”

Tell us about your successes and challenges in starting or sustaining Family Councils so we can share your stories.

Obtain a free DVD on Organizing Family Councils and download (http://www.canhr.org/familycouncils/FCBook.pdf) or order an Organizing Guide to Family Councils in Long Term Care Facilities http://www.canhr.org/familycouncils/.
This was a very good year for consumer protection legislation, as all of the CANHR sponsored and supported bills were signed into law this session.

**CANHR Sponsored**

**AB 2149 (Butler): Prohibition of Gag Orders in Elder Abuse Settlement Agreements:** Provides that an agreement to settle a civil action for physical abuse, neglect, or financial abuse of an elder or dependent adult shall not include any provision that, among other things, prohibits contact or cooperation with the county adult protective services agency, the long-term care ombudsman or any governmental entity. The bill would provide that any such provision is void as against public policy. **Status:** Signed by the Governor.

**SB 1170 (Leno): VA Benefit Scams/Senior Insurance:** Expands the definition of advertisement related to the sale and marketing of insurance products to seniors; add veterans organizations and the Department of Veterans Affairs to the list of those entities that cannot be used in deceptive or misleading advertising; and add the term “veteran” to those words deemed a senior designation. **Status:** Signed by the Governor.

**SB 1184 (Corbett): Veterans Benefits/Senior Insurance:** Prohibits an insurance broker or agent from participating in, being associated with, or employing any party that participates in, or is associated with, the obtaining of veterans benefits for a senior, unless the insurance agent or broker maintains procedural safeguards designed to ensure that the agent or broker transacting insurance has no direct financial incentive to refer the policyholder or prospective policyholder to any government benefits program. **Status:** Signed by the Governor.

**CANHR Support**

**AB 40 (Yamada): The Elder Abuse and Dependent Adult Civil Protection Act:** Establishes various procedures for the reporting, investigation, and prosecution of elder and dependent adult abuse. The act requires certain persons, called mandated reporters, to report known or suspected instances of elder or dependent adult abuse. **Status:** Signed by the Governor.

**AB 1710 (Yamada): Nursing Home Administrator Act of 2012:** Makes the Nursing Home Administrator Program (NHAP) self-sustaining by revising accounting procedures, eliminating the cap on fee increases, and requiring the Department to report projected costs annually to the Legislature. **Status:** Signed by the Governor.

**AB 1747 (Feuer): Life Insurance Consumer Protections:** Includes a number of consumer protections against cancellation of life insurance policies due to lapses in payment of premiums. **Status:** Signed by the Governor.

**AB 1775 (Wieckowski): Wage Garnishment Limits:** Raises the minimum floor of a judgment debtor’s wages that are exempt from garnishment from 30 times the federal minimum hourly wage to 40 times the California minimum hourly wage. **Status:** Signed by the Governor.

**AB 1823 (Yamada): Notice to VA Facility Residents:** Requires clarifying changes in the current quarterly statements regarding cost of care charges provided to residents of California Veterans facilities and would provide elderly and disabled veterans with a better understanding of the charges and an opportunity for planning. **Status:** Signed by the Governor.

**AB 1875 (Gatto): Time limit for Depositions:** Limits the time allowed for depositions to one day of seven hours in duration, except when longer sessions are agreed to or ordered by the court. This bill aligns California's deposition time limits with limits already in place in federal courts. **Status:** Signed by the Governor.

**AB 2010 (Bonilla): Reverse Mortgage Counseling:** Requires the prospective borrower to receive reverse mortgage counseling in person, unless the borrower elects to receive the counseling in another manner. **Status:** Signed by the Governor.

**SB 345 (Wolk): Long Term Care Ombudsman:** Strengthens the role and independence of the state long term care ombudsman office by requiring it to represent the interests of long-term care facility residents before governmental agencies and calling for the office to submit an annual advocacy report describing how it has carried out these duties and its future plans to do so. **Status:** Signed by the Governor.

**SB 1047 (Alquist and Correa): Silver Alert:** Requires that if a person is reported missing to a law enforcement agency, and that agency determines that certain requirements are met, including, among others, that the missing person is 65 years of age or older, the law enforcement agency shall request the California Highway Patrol to activate a Silver Alert. **Status:** Signed by the Governor.
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Did You Know?

You Have a Right to Clear up Inaccuracies in your Medical Record.

According to California Health and Safety Code §123111, patients have the right to clear up inaccuracies in their health and medical records. If during review of your records you find items or statements that are incorrect or incomplete, you have the right to prepare and present an addendum of up to 250 words per item. You must clearly state in writing that you wish to have the addendum added to your medical record. The health care provider must attach the addendum to your records and include the addendum whenever it makes a disclosure of the allegedly incomplete or incorrect portion of your records to any third party.

Nursing home residents and their representatives have the right to access and review all their records within 24 hours of an oral or written request (excluding weekends and holidays). Title 42, Code of Federal Regulations, §483.10(b)(2). It is a good idea to periodically review your records to see if there are any problems. Look to see what care and treatments are documented and how they compare with reality. Also check to see if your care plan reflects your needs and discussions about how to address them. If not, correct it. If you or a loved one were subjected to neglect, abuse or mistreatment, it is particularly important to examine the records to see how well it is documented. Take advantage of the opportunity the law affords to correct misinformation that often appears in medical records.

Dear Advocate,

My father is in a skilled nursing facility and from time to time he has extra medical needs that he can not pay for because he only has $35.00 left each month after he pays his share of cost. I was told that if I could get the physician to write a prescription that I could deduct these expenses from his share of cost. Unfortunately the attending physician is not being cooperative and will not write a prescription to included it in his plan of care. Is there anything that can be done about this? I can no longer afford to keep up with these out of pocket costs.

Sincerely,

Bemoaned in Berkeley

Dear Bemoaned,

You are correct; your father may use his share of cost to pay for medical expenses not covered by Medi-Cal. This right is provided by a California lawsuit settlement, Johnson v Rank. Under this settlement, Medi-Cal recipients may use their share of cost to pay for medically necessary supplies, equipment or services not covered under the Medi-Cal program. A current physician’s prescription is necessary and must be a part of the physician’s plan of care. If the physician is being uncooperative and will not write a prescription, your father is entitled to the health care provider/attending physician of his choice (42 C.F.R. §483.10(d)(1)), and is entitled to receive medical, dental remedial care services, supplies and /or equipment from such providers, even if they are not a part of or affiliated with the facility. In addition he has the right to purchase drugs, from a pharmacy or medical supplier of choice (H&S Code §1320; 22 CCR §72527(a)(22)).
**Past Speaking Engagements, Panel Discussions and Training Sessions**

- **September 4:** Long Term Care Advocate, Deborah Espinola, MSW presented on CANHR Services and Long Term Care Medi-Cal to the Social Workers at San Francisco’s Kaiser Medical Center.

- **September 4:** Prescott Cole participated in the California State Bar “Legal services State Bar Coordination Meeting” conference call.

- **September 6:** Prescott Cole was the featured speaker at the CANELA monthly luncheon meeting. His topic was on elder law legislation and updates on various elder financial abuse scams.

- **September 7:** Pat McGinnis was the guest speaker at the Piedmont Gardens CALCRA meeting in Oakland.

- **September 10:** Long Term Care Advocate, Deborah Espinola, MSW presented on Planning for Long Term Care for the Family Care Giver Alliances’ Spanish Support Group at the Bernal Heights Neighborhood Center in San Francisco.

- **September 11:** Prescott Cole taught a class at Hastings Law for Hastings Medical Legal Partnership of Seniors.

- **September 18:** Prescott Cole attended the SCAN Foundation 2012 LTSS Summit Conference in Sacramento.

- **September 19:** Prescott Cole and Shawna Reeves attended the Common Grounds conference co-sponsored by the FTC and California Attorney General’s Office.

- **September 22:** Long Term Advocate, Pauline Mosher attended the Senior Health & Wellness Fair located at the San Mateo Senior Center. Approximately 47 Vendors and 400-500 attendees were present at the fair. Pauline headed an information table and distributed CANHR fact sheets about Medi-Cal, VA Aid and Attendance, and planning for incapacity.

- **September 24:** Prescott Cole was a guest on the TRadio Program “Friends Without Benefits”.

- **October 2:** Pat McGinnis, Mike Connors, and Tony Chicotel went to Sacramento to participate in meetings of the Statewide Partnership to Improve Dementia Care and Reduce Inappropriate Use of Antipsychotic Medication in Nursing Homes. The Partnership’s recommendations are expected to generate a Department of Public Health report in early 2013.

- **October 2:** Prescott Cole taught a class for the Medical Legal Partnership for Seniors program at Hastings Law School.

- **October 2:** Shawna Reeves presented on elder financial abuse to staff members and volunteers at Tenants Together in San Francisco.

- **October 11:** Executive Director, Patricia McGinnis presented at CANHR’s Social Worker Training entitled “Medi-Cal for a Long Term Care Professionals,” to a group of over 50 community professionals at the Sobrato Community Conference Center in Milpitas.

- **October 11:** Prescott Cole attended meeting for the Northern California Elder Abuse Multidisciplinary Teams at the Institute on Aging in San Francisco.

- **October 19:** Pat McGinnis was a guest lecturer at the SFSU/Cal ARCH administrator certification class for RCFE administrators.

- **October 20-28:** Pat McGinnis and Prescott Cole were hosted by the Japan Bar Association, Waseda University and U-vision in Tokyo to discuss Human Rights at Elder Care Facilities in the U.S. and Japan.

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*CANHR on the Move...............(continued on page 11)*
• **October 24:** Shawna Reeves presented “Fighting Elder Financial Abuse: How to Detect Scams and Protect Seniors” to 25 professionals at the Over 60 Health Center in Berkeley.

• **October 24:** Claire Lomax, a CANHR volunteer hosted a CANHR information table at the 2012 Marin Senior Information Fair at the Marin Center Exhibit Hall in San Rafael.

• **November 1:** Long Term Care Advocate, Deborah Espinola, MSW presented to the Legal Aid Association of California’s 2012 Traveling Training on Veteran’s Affairs, Aid and Attendance: Eligibility and Scams, in Riverside.

• **November 10:** Claire Lomax, a CANHR volunteer hosted a CANHR information table at The Ethnic Health Institute, a community program of Alta Bates Summit Medical Center in Oakland and Berkeley, 4th Annual Caregivers Town Hall at the Samuel Merritt University Health Education Center in Oakland.

• **November 16 & 17:** CANHR hosted its 16th annual Elder Law Conference in Monterey, CA to a sold out crowd.

• **December 4:** Mike Connors and Tony Chicotel went to Sacramento to participate in meetings of the Statewide Partnership to Improve Dementia Care and Reduce Inappropriate Use of Antipsychotic Medication in Nursing Homes. The Partnership’s recommendations are expected to generate a Department of Public Health report in early 2013.

The lack of information available proved damaging to Lorchid’s mother. The facility she selected did not have sufficient staff to provide her mother with basic care. Her mother was not showered and dressed regularly. She was inadequately supervised. She had to be moved, which can be an exceptional setback to the health of someone with cognition problems due to the attendant confusion and stress. As Lorchid stated, “if this is a constant situation in this particular facility, and complaints were filed and could be searched by those looking for a place for their loved ones, we would have known about these issues.”

Aside from San Diego and Imperial Counties, there is no way to access a facility’s public file without traveling to a local district office. CANHR’s RCFE Guide web site (http://residentialcareguide.org) has some basic information regarding facilities such as whether nonambulatory residents or residents with dementia are allowed but additional information is only available if the facility has completed a questionnaire sent out by CANHR.

The lack of access to an RCFE’s public enforcement record is a considerable barrier to good assisted living care in California. Consumers deserve to know what the State knows about a facility’s performance, especially when a loved one’s health, safety, and well-being are at great risk. In this age of information, the State’s glaring omission deprives potential RCFE residents and their families of material vital to protecting themselves.

**Consumer’s Guide to Financial Considerations & Medi-Cal Eligibility**

Outlines requirements for Medi-Cal. Includes discussion of protection of assets, including the home, when a spouse enters a nursing home. Booklets are also available for free download in Spanish and Chinese.

Order online at [www.canhr.org](http://www.canhr.org) under Publications or from the CANHR office.
CANHR welcomes memorial and honorary gifts. This is a great way to honor a special person, or a loved one who has been a nursing home resident, while helping those who are nursing home residents. Recent gifts have been made in the names of the following persons:

**MEMORIALS**

Barbara Tremewan  
Marianne Meredith

Bruno and Evelyn Wartman  
Mr. & Mrs. John & Paddy Moran

Joan Barriga  
Jorge Barriga

Beryl Dubois  
Candie Brady

Carol Martin  
Eileen Bill

William F. Taylor  
The CANHR Staff

Bess Baron  
Murray Baron

Chet & Pat Brown  
Linda Johnson

My never forgotten wife, Rita Twomey  
Joseph Twomey

Howard & Marion Dudley  
Howard Dudley

**IN HONOR OF**

Kathleen Holland  
Jeremiah Holland

Rabbis Judah Dardik, Menachem Creditor, Raphael Asher, Adam Naftalin-Kelman, and Yonathan Cohen  
Karen Horowitz-Weiner

The development of better public policy  
Anonymous Donor

Marion S. John - age 101 on 12/6  
George John

Joan Barriga  
Jorge Barriga

Your work to benefit us all  
Jackie Johnson

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**Year 2013 Rate and Cost of Living Increases**

Rate and Cost Increases Effective 1/1/2013

**2013 Social Security Rates:**  See Social Security Administration website: [www.ssa.gov](http://www.ssa.gov)
There will be a 1.7% Cost of Living Increase (COLA) in 2013.

**2013 Medicare Rate Increases:**  See Medicare website: [www.medicare.gov](http://www.medicare.gov)

**MEDICARE PART A**

Hospital Deductible: $1,184.00 (up from $1,156)

Coinurance per day:

- Day 61-90: $296.00 (up from $289)
- Day 91-150: $592.00 (up from $578)
- All costs from each day beyond 150 days.

Skilled Nursing Facility (SNF) Coinurance: $148.00 per day for days 21-100 (up from $144.50)

**MEDICARE PART B**

Premium per month: $104.90 (up from $99.90)

Deductible per year: $147.00 (up from $140)

**2013 Medi-Cal Resources Rates:**

- Community Spouse Resource Allowance (CSRA): $115,920.00 (up from $113,640)
- Minimum Monthly Maintenance Needs Allowance (MMMNA): $2,898.00 (up from $2,841)
- Annual Private Pay Rate (APPR): $7,092.00 (current rate; 2013 rate TBD)

**SSI Non-Medical Board and Care Rate:**

$1,122 (up from $1,110) of which $129 (up from $128) is the personal and incidental needs allowance.
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CANHR, 650 Harrison Street, 2nd Floor, San Francisco, CA 94107.

Enclosed is my check for: $500 $100 $50 $30 Other ________________

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CANHR prohibits the use of its name for the purpose of advertisement by attorneys, financial planners or any other organization or entity.
Citation Watch - Consumer Report

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Alameda County

Alameda County Medical Center D/P SNF
15400 Foothill Boulevard, San Leandro
A $15000 Decubiti (Bedsores) 04/26/2012
The facility was cited for failing to keep a resident from developing a sore after admission. The resident developed a sore on his left foot. The facility also failed to develop a treatment plan for the sore. The sore became infected and developed gangrene; the resident had to have his left foot amputated. Citation # 020009261.

Castro Valley Healthcare and Rehabilitation Center
20259 Lake Chabot Rd., Castro Valley
B $1000 Administration Bed Hold Patient Rights 03/15/2012
On 3/2/11, the resident went to a liquor store and returned to the facility. When the DON asked if he had alcohol, the resident threw a soda can. The DON determined the resident’s behavior was volatile and unsafe for himself and staff. The DON called the police, who declared a $150 hold on the resident and transferred him to an acute psychiatric hospital for evaluation. The evaluation was completed on 3/3/11, and the psychiatrist cleared the patient as stable and able to return to the facility. However the facility refused to readmit the resident due to his behavior and inability to pay fees. The facility was cited for failing to observe the resident’s right to return to the facility, and failing to observe the resident’s right to be given an advanced notice of discharge when the resident could no longer pay for his stay at the facility. Citation # 020009140.

Crown Bay Nursing & Rehabilitation Center
508 Westline Dr., Alameda
B $1000 Mandated Reporting Physical Abuse 03/20/2012
On 10/14/10, the Department of Public Health (DPH) received a written anonymous complaint that a CNA had slapped a resident during the provision of personal care on 10/6/10. Upon investigation the Department determined that the CNA in question had been working at the facility on 10/6 and the Director of Nurses (DON) had been informed of the incident by the facility’s Director of Staff Development. The DON stated that she did not report the incident to DPH because she terminated the CNA on 10/11/10. The facility was cited for failure to report the allegation of abuse to DPH, which prevented the Department from conducting an independent investigation into the incident. Citation # 020009162.

Fremont Healthcare Center
39022 Presidio Way, Fremont
B $750 Injury 02/01/2012
On 7/27/11, a 93 year old resident was given hot water in a styrofoam cup which spilled in her lap causing a 5 x 3 inch burn on her left thigh and 1.5 x 1 inch full thickness of her skin to peel off. The Dietary Services Supervisor stated in an interview that the styrofoam cups were for staff only and not to be given to residents. The facility was cited for failing to prevent the accidental burning of a resident by giving her a hot cup of tea in a styrofoam cup which was not a stable vessel intended for resident use. Citation # 020008964.

Gateway Care & Rehabilitation Center
26660 Patrick Ave., Hayward
B $1000 Careplan Fall Injury Physical Environment Supervision 04/26/2012
The facility was cited for failing to ensure a resident’s environment remained free of accidents and received adequate supervision. On 7/15/11, a CNA transferred a resident using the wrong type of lift and alone. The resident’s careplan called for a two person assist. The resident fell, and sustained a fractured femur and "prob-ably" a fractured tibia. Citation # 020009260.

Hayward Hills Health Care Center
1768 ‘b’ Street, Hayward
B $700 Mandated Reporting Sexual Abuse 03/20/2012
The facility was cited for failing to report alleged sexual abuse to the Department within 24 hours. A resident made allegations of rape on 10/29/10 and 11/4/10. Neither
of the allegations were reported or investigated within 24 hours. The facility reported the 11/4/10 allegation to the Department on 11/12/10, and the 10/29/10 allegation was not reported. Citation # 020009163.

Kindred Transitional Care and Rehabilitation - Bay View
516 Willow St., Alameda

AA $75000 03/05/2012
CitationWatch description will be published once citation is received. Citation # 020009078.

Morton Bakar Center
494 Blossom Way, Hayward

AA $60000 03/12/2012
CitationWatch description will be published once citation is received. Citation # 020009084.

Contra Costa County

Kindred Nursing and Rehabilitation-Ygnacio Valley
1449 Ygnacio Valley, Walnut Creek

B $750 Administration Bed Hold Patient Rights 03/02/2012
On 1/17/11, the resident complained of severe abdominal pain and was transferred to the hospital. The “Notice of Bed Hold Policy” completed on 1/18/11, stated the resident elected to hold a bed from 1/17/11 to 1/23/11 and agreed to pay the facility for any additional days that the bed was to be held. The hospital contacted the facility to return the resident on 1/26, 1/27, 1/29, 2/4, 2/23, 2/25 and 3/1/11. However, the facility stated there were no beds available on those dates, and eventually refused to readmit the resident due to insufficient funding/cost prohibitive due to extensive care needs. The facility was cited for failing to readmit the resident after hospitalization. Citation # 020009069.

Lone Tree Convalescent Hospital
4001 Lone Tree Way, Antioch

B $600 Neglect 03/06/2012
On 8/5/11, a resident admitted for rehabilitation following hip surgery reported that she was feeling “lousy” and had nausea. She was also found to have a fever but no note was made and no action taken. On 8/6/11, the resident was vomiting and given a medication for nausea. On 8/7/11, the resident had low blood pressure and was sent to the hospital where she received intensive care for septic shock due to an infected surgical wound. The facility was cited for failing to properly monitor the resident’s condition and risk for infection. Citation # 020009082.

Vale Healthcare Center
13484 San Pablo Ave., San Pablo

A $19000 Careplan Neglect 05/14/2012
A 97 year old female resident was admitted to the facility on 2/14/11 for rehabilitation following a broken hip. She received numerous medications that cause constipation and her careplan reflected risk for constipation. The resident had no bowel movements from 2/19/11 through 2/23/11 and on subsequent days had no documentation of bowel movements. A physician order was made for a daily suppository and enema as needed on 3/3/11 but the treatments were not documented on some days. On 3/12/11, the resident complained of stomach pain and skipped her lunch. That evening, the resident became unresponsive and was sent to the hospital where she died on 3/15/11 of a perforated colon and overwhelming sepsis due to fecal impaction. The facility was cited for failing to implement the resident’s careplan for constipation and physician orders, and for failing to notify the physician about his patient’s condition. Citation # 020009298.

Glenn County

Willows Care Center
320 North Crawford St., WILLOWS

B $300 Mandated Reporting 09/11/2012
On 7/7/12, a nursing assistant student overheard a visitor verbally abuse a resident. However, the incident was not reported to the Department of Public Health until 7/9/12. The facility was cited for failing to report the abuse within 24 hours as required. Citation # 230009426.

B $2000 Physical Abuse 10/23/2012
The facility was cited for failing to keep a resident free from harassment. A Licensed Nurse ordered two CNAs to wake a resident up every 30 minutes while she slept so she knew what it felt like to be harassed. The Licensed Nurse was terminated for gross misconduct. Citation # 230009521.

Humboldt County

Eureka Rehabilitation & Wellness Center, LP
2353 Twenty-Third St, Eureka

B $1000 Infection Injury 05/02/2012
On 11/14/10, a resident suffered a skin tear to her right shin when she ran into the edge of a bed while in her wheelchair. The physician was not notified for eleven days, at which point the wound was exhibiting signs of infection. The resident required a ten-day course of antibiotics to cure the infection. The facility was cited for failure to provide ongoing assessment of the wound, failure to plan treatment, and failure to notify the resident’s physician of the wound. Citation # 110008823.

B $1000 Dignity Verbal Abuse 05/30/2012
The facility was cited for failure to treat an 84-year-old resident with anxiety and advanced dementia with respect and dignity on 7/11/11 when a staff member pointed her finger at the resident and scolded her in front of other residents, visitors and staff. As a result of the scolding, the resident became fearful, started crying, and firmly squeezed the hand of another resident’s family member. Citation # 110008463.

Lake County

Meadowood Nursing Center
3805 Dexter Lane, Clearlake

B $1000 Fall Mandated Reporting 06/13/2012
A resident was found on the floor on 7/16/11.
ity was cited for failing to call the physician promptly after the unwitnessed fall. X-rays were not ordered until 7/17/11 and resident suffered a broken bone. Citation # 110009335.

Marin County

Rafael Convalescent Hospital
234 N. San Pedro Rd., San Rafael
B $1000 Notification 06/05/2012
The facility was cited for failing to post overall facility rating information determined by the federal Center for Medicare and Medicaid Services (CMS) in one of their units as of 5/2/12. Citation # 110009283.

Merced County

Franciscan Convalescent Hospital
3169 ‘M’ Street, Merced
B $2000 Mental Abuse Physical Abuse Sexual Abuse 08/21/2012
From approximately the second week of 9/2011 to 10/2011 a CNA subjected six residents with severe cognitive and physical impairments to emotional, verbal and physical abuse. This abuse included pinching and slapping patients’ breasts, making lewd sexual remarks about patients, and shoving patients’ shirts into their mouths. The facility was cited for failing to ensure that patients were free from mental and physical abuse, which had a direct or immediate relationship to the health, safety or security of the residents. Citation # 040009448.

Nevada County

Wolf Creek Care Center
107 Catherine Lane, Grass Valley
B $1000 10/15/2012
CitationWatch description will be published once citation is received. Citation # 230009305.

Sacramento County

Asbury Park Nursing And Rehabilitation Center
2257 Fair Oaks Blvd., Sacramento
B $500 08/16/2012
CitationWatch description will be published once citation is received. Citation # 030009433.

Eskaton Care Center Greenhaven
455 Florin Road, Sacramento
B $1000 Dignity Mandated Reporting Physical Abuse 02/16/2012
In May 2009, an 85 year old resident was mistreated when a certified nursing assistant (CNA) splashed water on her face and head while she was sleeping. After hearing yelling, another CNA confronted the abuser, who responded, “I’m just splashing water on her face,” and laughed when she was told to stop. The resident who was abused later expressed concern about her safety in the facility. The facility was cited because the resident was not treated with dignity and respect and for failing to report the abuse in a timely manner. Citation # 030009009.

Golden Living Center - Galt
144 F Street, Galt
B $1000 09/20/2012
CitationWatch description will be published once citation is received. Citation # 030009507.

Manorcare Health Services (Citrus Heights)
7807 Uplands Way, Citrus Heights
B $800 Careplan Patient Care Sexual Abuse Supervision 07/26/2012
The facility was cited for failing to prevent resident to resident abuse, identify and plan patient care needs based on initial and continuous assessment and to implement patient care policies and procedures. This failure resulted in resident to resident abuse. On 3/21/08, a resident with a history of assaultive behavior grabbed another resident’s breasts. Citation # 030009418.

Sacramento Sub-Acute
5255 Hemlock Street, Sacramento
B $1000 Mandated Reporting Physical Abuse 02/01/2012
The facility was cited because it did not immediately report an incident in May 2009 involving two residents who hit and kicked each other. A report was later filed with the Department of Public Health, but not within 24 hours as required. It was not determined if either resident was hurt during the altercation. Citation # 030008960.

San Francisco County

Laguna Honda Hospital & Rehabilitation Ctr D/P Snf
375 Laguna Honda Blvd., San Francisco
B $1000 Injury Physical Environment 06/20/2012
On 8/7/11, a 200 pound sliding glass door at the entrance of the resident’s room came off its roller track and fell on the resident’s over-bed table, pushing him to the floor and fracturing three of his ribs. The facility was cited for failing to ensure that the facility was maintained in good repair at all times to ensure safety of residents. And failed to ensure that all buildings and fixtures were maintained in operable condition. Citation # 220009366.

San Joaquin County

Wagner Heights Nursing And Rehabilitation Center
9289 Branstetter Place, Stockton
B $1000 07/25/2012
CitationWatch description will be published once citation is received. Citation # 030009409.

Windsor Hampton Care Center
442 E. Hampton Street, Stockton
B $500 Careplan Fall Injury Patient Care Physical Environment 10/16/2012
The facility was cited for failing to implement the plan
of care for the resident’s bed alarm resulting in the resident falling on 7/1/10, and sustaining a hip fracture requiring surgical intervention. Citation # 030009548.

Santa Clara County

Palo Alto Sub-Acute And Rehabilitation Center
911 Bryant Street, Palo Alto

B $2000 Careplan Dietary Services Feeding Hydration Notification Nutrition Patient Care
08/01/2012

A resident was admitted to the facility on 5/7/11. His care plan did not indicate he needed assistance with feeding or fluids. No documentation indicated that he was fed or offered fluids during his seven day stay. His fluid intake was one third to half of the recommended minimum to avoid dehydration. This resulted in the resident being sent to the hospital where he died on 5/14/11, with a diagnosis including low blood pressure due to the abnormal depletion of body fluids, urinary tract infection and septic shock. The facility was cited for failing to identify the resident’s need for eating assistance and assess adequacy of fluid intake. Failure to notify the physician when the resident’s fluid intake was inadequate and for failing to provide assistance for eating and drinking. Citation # 220009413.

Santa Cruz County

Valley Convalescent Hospital
919 Freedom Boulevard, Watsonville

B $1200 Patient Rights 10/17/2012

On 9/21/12, the facility forced a resident’s family member to leave the building after she complained about the quality of care and threatened to sue the facility. The facility was cited for violating the resident’s right to have visitors. Citation # 070009541.

Shasta County

Mayers Memorial Hospital D/P SNF
43563 Hwy 299 E, P.O. Bx 459, Fall River Mills

B $1000 10/16/2012

CitationWatch description will be published once citation is received. Citation # 230009377.

Solano County

Fairfield Post-Acute Rehab
1255 Travis Blvd., Fairfield

B $1000 Careplan Deterioration Fall Injury Notification Patient Care Supervision 04/27/2012

On 1/12/12 at 6:05 am, the resident experienced an unwitnessed fall in the bathroom, fracturing four ribs and a mild collection of blood built up in the space between the chest wall and lung. The physician was notified and ordered four liters of oxygen per minute. However licensed nurses on three separate shifts only administered two liters per minute. The physician was not notified that the resident was only receiving half the amount of oxygen ordered. The resident’s condition deteriorated and the resident passed away on 1/16/12 at 3:18 pm. The facility was cited for failing to carry out orders for oxygen as prescribed by the resident’s physician. Citation # 110008977.

B $1000 Dietary Services Physical Environment
05/30/2012

The facility was cited for failing to notify the Department of an electrical fire on 8/9/11. The incident caused the kitchen to close for several days and residents were without hot food and drinks. The facility was also cited for failing to provide documentation about the incident to the Department when it was requested. Citation # 110009253.

Sonoma County

Emeritus at Santa Rosa
300 Fountaingrove Parkway, Santa Rosa

B $1000 Decubiti (Bedsores) Dignity Neglect Physical Abuse Verbal Abuse 02/29/2012

Progress notes dated 9/13/10, indicated that a resident had developed pressure sores on her left buttock after being left in her wheelchair for 12 hours a day for two days. On 10/7/10, the resident requested her dressing be changed as it was leaking and smelling and was told by a staff member that he did not have time to change the dressing. The same staff member refused to bring the resident pain medication and was rough during wound treatment causing the resident extreme pain. The resident stated she felt intimidated by and afraid of the staff member. The facility was cited for failure to protect the resident from neglect and abuse and, treat the resident with dignity and respect. Citation # 110008291.

B $1000 Decubiti (Bedsores) Mandated Reporting 02/29/2012

The facility was cited for failing to notify the Department of alleged abuse within 24 hours. In October 2010, a staff member caused a resident unnecessary pain while changing the dressing on her wound, with potential that the resident be subjected to further intense and unnecessary pain. Citation # 110008884.

B $2000 Fall 06/01/2012

On 11/1/12, a resident with severe dementia suffered a cervical neck fracture when she fell out of bed. When asked why she had tried to get out of bed, the resident responded, “My mother was in the closet.” Although the resident was at risk for falls due to her lack of ability to transfer without assistance, medication side effects, history of delusions, and history of removing her tab alarm, the facility had failed to ensure that the resident’s care plan was effectively updated to prevent a potential fall, which resulted in her fractured neck and hospitalization. Citation # 110009121.

B $2000 Careplan Fall Injury 06/01/2012

A resident at risk for falls, fell twice while unsupervised in the facility. The second fall on 12/24/11, resulted in a fracture to his left femur at the hip joint. The facility was cited for failure to follow the careplan interventions to prevent falls. Citation # 110009120.
The facility was cited for failure to post the overall facility rating information in an area accessible and visible to members of the public and in an area used by residents for communal functions, such as dining, resident council meetings, or activities. This had the potential to prevent residents and the public from having access to the information. Citation # 110009336.

Stanislaus County

Elness Convalescent Hospital
812 West Main Street, Turlock

B $1000 Fall Injury 10/04/2012
On 8/23/09, a 79 year old resident with dementia and congestive heart failure fell backward while attempting to ambulate without assistance. She died the following day from bleeding on the brain. The facility was cited for failure to ensure adequate supervision of transfers and appropriate use of a walker without assistance as well as for failure to ensure that the resident’s personal alarm was attached, working properly, and within the resident’s reach at all times. Citation # 030009531.

Yolo County

Courtyard Health Care Center
1850 East 8th Street, Davis

B $1000 Physical Abuse 07/26/2012
On 7/10/09, a 62 year old resident diagnosed with senile dementia, psychosis, and psychomotor retardation was struck on the left shoulder and mid-back by the closed fist of another resident. A CNA who observed the incident immediately separated the patients and reported the incident to a registered nurse, but the incident was not reported to the Department of Public Health and local Ombudsman until 9/13/09. The facility was cited for failure to report the allegation of abuse to the Department of Public Health and local Ombudsman within 24 hours of the event. Citation # 030009414.

B $1000 Deterioration 08/30/2012
On 3/17/10, an 88 year old resident diagnosed with senile dementia, psychosis, and psychomotor retardation was struck on the left shoulder and mid-back by the closed fist of another resident. A CNA who observed the incident immediately separated the patients and reported the incident to a registered nurse, but the incident was not reported to the Department of Public Health and local Ombudsman until 9/13/09. The facility was cited for failure to report the allegation of abuse to the Department of Public Health and local Ombudsman within 24 hours of the event. Citation # 030009414.

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**Los Angeles County**

**Berkley East Convalescent Hospital**

2021 Arizona Ave., Santa Monica

**A $20000 Infection Medication Neglect Notification Nutrition Patient Care Staff (Inservice) Training 05/02/2012**

On 10/28/10, while moving a resident from his wheelchair to his bed, his G-tube was dislodged. The nurse did not follow proper policy and procedures and reinserted it without consulting the doctor. The G-tube was not inserted correctly and caused a moderately large amount of free air in the peritoneal cavity, fluid throughout the abdomen and pelvic areas and other complications. The resident died of other complications on 11/17/10. The facility was cited for failing to ensure that nursing staff notified the physician prior to reinserting a GT and for failing to establish patient care policy and procedure on GT reinsertion. Citation # 910008601.

**Harbor View Center**

490 W 14th Street, Long Beach

**B $20000 Administration Sexual Abuse 05/09/2012**

On 9/29/11 before midnight, a 15 year old female resident was asked to expose her breast by a male employee (A), who then went inside the resident’s bathroom and exposed his genitals. Later that night, the resident woke up to the Employee A kissing her lips. On 11/4/11, the resident informed another employee (B) of the incident, who encouraged the resident to speak to her therapist about the incident, which she did on 11/9/11. The facility notified the required agencies, and Employee A and Employee B were suspended pending an investigation. On 11/21/11, Employee A was arrested. The facility was cited for failing to: ensure the resident was not sexually abused, implement policies and procedures on abuse prevention, and implement policies and procedures of immediately reporting an abuse. Citation # 940009293.

**Verdugo Valley Skilled Nursing & Wellness Centre**

2635 Honolulu Avenue, Montrose

**A $20000 Careplan Medication 09/19/2012**

A 30 year old male resident with paraplegia and deep vein thrombosis was prescribed Heparin and Coumadin in April and May 2010. Both medications are blood-thinning anticoagulants. No care plan was developed to monitor the resident for excess bleeding in his pressure ulcers. No blood tests were performed. On 7/20/10, the resident began screaming for help with heavy bleeding from his groin region. The resident yelled “I do not want to die!” He was rushed to the hospital but died later that day of blood loss. The facility was cited for failing to develop a care plan regarding anticoagulant drugs and for failing to obtain blood tests to monitor their therapeutic levels. Citation # 920009239.

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**Longwood Manor Convalescent Hospital**

4853 W. Washington Blvd., Los Angeles

**B $500 03/08/2012**

CitationWatch description will be published once citation is received. Citation # 910009049.

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**Riverside County**

**Mission Care Center**

8487 Magnolia Ave., Riverside

**B $1000 Dignity Physical Abuse Staffing 10/04/2012**

The facility was cited for failing to report alleged abuse to the Department within 24 hours. On 11/3/09, a resident stated that two or three weeks from that date, a CNA answered her call light but refused to help her to the bathroom. The CNA told her it was not her job to take her to the bathroom all the time and to go on her diaper. This caused the resident to become upset and embarrassed. Citation # 250009539.

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**Ventura County**

**Fillmore Convalescent Center**

118 B Street, Fillmore

**B $200 Administration 10/09/2012**

On 8/19/11 employees of the facility began experiencing that their payroll checks were bouncing due to insufficient funds. All toll, twenty eight employee payroll checks were returned for insufficient funds. The facility was cited for failure to ensure that, as required by law, the Department of Health was notified within 24 hours after a financial institution refused to honor the regular payroll checks issued by the facility to its employees. Citation # 050009389.