

**California Department of Public Health
Profile of a Sample of California Skilled Nursing Facilities Audited by
Licensing and Certification for Compliance with AB1629 during
FY 2005-2006¹**

Overview

In fiscal year 2005-2006, Licensing and Certification audited a random sample of 246 SNFs to determine how many of the facilities maintained 3.2 NHPPD staffing levels on all audited days. By this criterion, sixty-three of these facilities were considered compliant and one hundred eighty-three of these facilities received deficiencies for noncompliance.

During fiscal year 2005-2006, fifty-one (81%) of the compliant facilities were found to have federal deficiencies and four (6%) of them received state citations. Eight (13%) of the compliant facilities did not receive any staffing deficiencies, federal deficiencies nor state citations during this time frame². On the other hand, all one hundred eighty-three of the noncompliant facilities received state citations and/or federal deficiencies. That is, one hundred forty-four (79%) of the noncompliant facilities were found to have federal deficiencies and thirty-nine (21%) of them received state citations. The compliant and noncompliant facilities jointly received a total of 1101 deficiencies and 70 citations (See Table I).

The majority of the federal deficiencies (716 or 65%) issued to the 246 audited facilities were isolated cases of noncompliance resulting in “*minimal* physical, mental, and/or psychosocial discomfort to the resident.” These violations are remedied primarily with a plan of correction and civil monetary penalties are not required. The facilities were issued seven federal deficiencies representing “substandard quality of care” and one state citation of the severest type,

¹ This brief profile is of the staffing sample for FY 2005-2006 from L&C’s Legislative Report. Data from FY 2005-2006 is used in this response because it is the most complete annual data at this time. Data from prior years can be provided at a later date.

² CMS requires that certified SNFs undergo a recertification survey every 9 to 15.9 months. In other words, a recertification survey must occur no sooner than 9 months after the previous survey, but no later than 15.9 months following that previous survey. These facilities may not have been surveyed during this period.

category AA. Overall, although the federal and state violations of these audited facilities were many, most were not given high scope and severity.

TABLE I. Status of nursing facilities surveyed during FY 2005-2006 for AB 1629 compliance.

| | NUMBER OF COMPLIANT/ NONCOMPLIANT FACILITIES | % | NUMBER OF FACILITIES ISSUED FEDERAL DEFICIENCIES | NUMBER OF FEDERAL DEFICIENCIES ISSUED | % | NUMBER OF FACILITIES ISSUED STATE CITATIONS | NUMBER OF STATE CITATIONS ISSUED | % |
|-------------------------|---|-------------|--|---------------------------------------|-------------|---|----------------------------------|-------------|
| COMPLIANT FACILITIES | 63 * | 26% | 51 | 400 | 36% | 4 | 9 | 13% |
| NONCOMPLIANT FACILITIES | 183 | 74% | 144 | 710 | 64% | 39 | 61 | 87% |
| TOTAL | 246 | 100% | 238 | 1110 | 100% | 43 | 70 | 100% |

* 8 of the facilities did not receive any federal deficiencies or state citations during FY 2005-2006.

Federal Deficiencies

Table II shows that, comparatively speaking, the percentages of federal deficiencies issued to both compliant and noncompliant facilities were similar. For example, some of the similarities between compliant and noncompliant facilities in the sample include:

- Similar proportions of deficiencies issued at the Scope and Severity E rating, 17% for each type of facility.
- Similar proportions of deficiencies issued at the Scope and Severity D rating, (60% and 67% issued to compliant and noncompliant facilities respectively).
- Similar proportions of the most severe deficiencies, “substandard-quality-of-care” were issued to both compliant and noncompliant facilities.
- There was similar issuance of deficiencies representing immediate jeopardy to the residents. That is, neither compliant nor noncompliant facilities in the sample were issued deficiencies as a result of actions causing immediate jeopardy to the health and well-being of the residents

TABLE II. The Scope and Severity Table for federal deficiencies issued to compliant and noncompliant facilities* audited in FY 2005-2006 for compliance with AB 1629 3.2 NHPPD requirements.

| | | | |
|---------|----------------------|---------------------|-------------------|
| LEVEL 4 | J 0/0 0% | K 0/0 0% | L 0/0 0% |
| LEVEL 3 | G 19/29 5%/4% | H 0/3 0%/.4% | I 0/0 0% |
| LEVEL 2 | D 238/478 60%/67% | E 68/119 17%/17% | F 2/2 1%/.3% |
| LEVEL 1 | A 11/3 3%/.4% | B 54/69 14%/10% | C 3/7 .4%/1% |
| | Isolated | Pattern | Widespread |

↑ SEVERITY/SCOPE →

*Compliant/Noncompliant Facilities,

Total Deficiency Count: N = 395/710

State Citations

The compliant facilities received a total of 9 state citations and the noncompliant facilities received 61 state citations. The most serious of violations are classified as Class AA because they are issued when a facility violation is the direct, proximate cause of a resident's death. By comparison, none of the compliant facilities received citations of this nature; however, one of the noncompliant facilities received one Class AA citation. The Class A citations are issued to a facility for actions that cause serious harm to a resident. One of the compliant facilities received 1 Class A citation and ten of the noncompliant facilities received 12 Class A citations. The majority of the citations issued to both compliant and noncompliant facilities were Class B citations at a rate of 89% (8 of 9) and 79% (48 of 61) respectively. These are issued for actions that have a direct or immediate relationship to health, safety, and/or security but do not meet the requirements for Class A or Class AA citations. None of the facilities received Class Retaliation and Discrimination (R/D), Class Willful Material Omission (WMO), or Class Willful Material Falsification (WMF) citations. Overall,

comparatively speaking, the noncompliant facilities appear more likely to receive citations of either Class AA, Class A, or Class B than the compliant facilities.

COMPARISON OF STATE CITATIONS ISSUED TO SNFs AUDITED DURING FY 2005-2006 FOR COMPLIANCE WITH AB 1629 3.2 NHPPD STAFFING REQUIREMENTS

