

California Department of Public Health

CDPH Orange District Office Received 7/21/22

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA060000011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/01/2022
NAME OF PROVIDER OR SUPPLIER FOUNTAIN VALLEY REGIONAL HOSPITAL & M		STREET ADDRESS, CITY, STATE, ZIP CODE 17100 EUCLID STREET FOUNTAIN VALLEY, CA 92708		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 000	Initial Comments The following reflects the findings of the California Department of Public Health during the investigation of COMPLAINT Number: CA00791092. Inspection was limited to the specific complaint investigated and did not represent the findings of a full inspection of the facility. Representing the California Department of Public Health: Surveyors 37722, HFEN and 29798, HFEN. THE DEPARTMENT WAS ABLE TO PARTIALLY SUBSTANTIATE THE COMPLAINT ALLEGATIONS AND THE DEFICIENCIES WERE CITED AT E306 and E307. GLOSSARY OF ABBREVIATIONS AND BRIEF DEFINITIONS: CNO: Chief Nursing Officer DOU: Direct Observation Unit P&P: policy and procedure RN: Registered Nurse Telemetry: the practice of sending electronic signals from one place to another to allow the staff to monitor the patient's heart rate and rhythm	E 000		
E 306	T22 DIV5 CH1 ART3-70217(a)(9) Nursing Service Staff (9) The licensed nurse-to-patient ratio in a step-down unit shall be 1:4 or fewer at all times. Commencing January 1, 2008, the licensed nurse-to-patient ratio in a step-down unit shall be 1:3 or fewer at all times. A "step down unit" is defined as a unit which is organized, operated,	E 306		

Licensing and Certification Division
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

D9Q411

If continuation sheet 1 of 5

Accepted by 37722 on 7/27/22

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA060000011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/01/2022
NAME OF PROVIDER OR SUPPLIER FOUNTAIN VALLEY REGIONAL HOSPITAL & M		STREET ADDRESS, CITY, STATE, ZIP CODE 17100 EUCLID STREET FOUNTAIN VALLEY, CA 92708		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 306	<p>Continued From page 1</p> <p>and maintained to provide for the monitoring and care of patients with moderate or potentially severe physiologic instability requiring technical support but not necessarily artificial life support. Step-down patients are those patients who require less care than intensive care, but more than that which is available from medical/surgical care. "Artificial life support" is defined as a system that uses medical technology to aid, support, or replace a vital function of the body that has been seriously damaged. "Technical support" is defined as specialized equipment and/or personnel providing for invasive monitoring, telemetry, or mechanical ventilation, for the immediate amelioration or remediation of severe pathology.</p> <p>This Statute is not met as evidenced by: The above regulation was NOT MET as evidenced by:</p> <p>Based on interview and record review, the hospital failed to ensure the licensed nurse-to-patient ratio in the step-down unit or DOU was maintained as required.</p> <p>Findings:</p> <p>Review of the hospital's P&P titled Plan for the Provision of Patient Care and Services dated 7/23/21, showed the nursing division is committed to ensuring adequate staffing to meet the needs of patients and their families. Staffing is performed using staffing guidelines established from historical data that includes acuity information, and activity logs. The daily and shift staffing are adjusted based on assessment of patient acuity and staffing guidelines and staffing</p>	E 306		

CDPH Orange District Office Received 7/21/22

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA060000011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/01/2022
NAME OF PROVIDER OR SUPPLIER FOUNTAIN VALLEY REGIONAL HOSPITAL & M		STREET ADDRESS, CITY, STATE, ZIP CODE 17100 EUCLID STREET FOUNTAIN VALLEY, CA 92708		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 306	Continued From page 2 will at a minimum comply with the State of California mandated nurse-to-patient ratios. On 6/29/22, review of the DOU staffing assignment report was initiated. The following was identified: - On 6/3/22, the night shift, four RNs had a 1:4 licensed nurse-to-patient ratio. - On 6/19/22, the day shift, two RN had a 1:4 licensed nurse-to-patient ratio. - On 6/19/22, the night shift, one RN had a 1:4 licensed nurse-to-patient ratio. - On 6/21/22, the day shift, two RNs had 1:4 licensed nurse-to-patient ratio for six hours or more during their 12 hours shift. On 6/29/22 at 1520 hours, an interview was conducted with the DOU Director. The DOU Director verified the step-down unit or DOU staffing was out of ratio on 6/3, 6/19, and 6/21/22. On 6/29/22 at 1630 hours, an interview was conducted with the CNO. The CNO verified the DOU staffing was out of ratio due to the staff sick calls.	E 306		
E 307	T22 DIV5 CH1 ART3-70217(a)(10) Nursing Service Staff (10) The licensed nurse-to-patient ratio in a telemetry unit shall be 1:5 or fewer at all times. Commencing January 1, 2008, the licensed nurse-to-patient ratio in a telemetry unit shall be 1:4 or fewer at all times. "Telemetry unit" is defined as a unit organized, operated, and	E 307		

California Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA060000011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/01/2022
NAME OF PROVIDER OR SUPPLIER FOUNTAIN VALLEY REGIONAL HOSPITAL & M		STREET ADDRESS, CITY, STATE, ZIP CODE 17100 EUCLID STREET FOUNTAIN VALLEY, CA 92708		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 307	<p>Continued From page 3</p> <p>maintained to provide care for and continuous cardiac monitoring of patients in a stable condition, having or suspected of having a cardiac condition or a disease requiring the electronic monitoring, recording, retrieval, and display of cardiac electrical signals. "Telemetry unit" as defined in these regulations does not include fetal monitoring nor fetal surveillance.</p> <p>This Statute is not met as evidenced by: The above regulation was NOT MET as evidenced by:</p> <p>Based on interview and record review, the hospital failed to ensure the licensed nurse-to-patient ratio in the medical/surgical/telemetry unit was maintained as required.</p> <p>Findings:</p> <p>Review of the hospital's P&P titled Plan for the Provision of Patient Care and Services dated 7/23/21, showed the nursing division is committed to ensuring adequate staffing to meet the needs of patients and their families. Staffing is performed using staffing guidelines established from historical data that includes acuity information, and activity logs. The daily and shift staffing are adjusted based on assessment of patient acuity and staffing guidelines; and staffing will at minimum comply with the State of California mandated nurse:patient ratios.</p> <p>Review of the medical/surgical/telemetry 4 unit staff assignments dated 6/18/22 night shift, and 6/19/22 day shift, showed on both days, two staff were assigned five patients each during these shifts instead of 1:4 licensed nurse-to-patient</p>	E 307		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: CA060000011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 07/01/2022	
NAME OF PROVIDER OR SUPPLIER FOUNTAIN VALLEY REGIONAL HOSPITAL & M		STREET ADDRESS, CITY, STATE, ZIP CODE 17100 EUCLID STREET FOUNTAIN VALLEY, CA 92708		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
E 307	Continued From page 4 ratio. On 7/1/22 at 1100 hours, an interview with the Director of the East Tower was conducted. The Director of East Tower stated the medical/surgical/telemetry 4 Unit was out of ratio on 6/18/22 night shift and 6/19/22 day shift.	E 307		



Fountain Valley
Regional Hospital
Tenet Health Pacific Coast



Event: CA00791092

The plan of correction is prepared in compliance with state regulations and is intended as Fountain Valley Regional Hospital and Medical Center's evidence of compliance. The submission of the plan of correction is not an admission by the facility that it agrees that the citations are correct or that it violated the law.

Organization Minutes:

The confidential and privileged minutes are being retained at the facility for agency review and verification upon request.

Exhibits:

All exhibits including revisions to Medical Staff Bylaws, reviewed/revised or promulgated policies and procedures, documentation of staff and medical staff training/education are retained at the facility for agency review and verification upon request.

Plan of Correction:

Tag E306

Policies & Procedures:

The Chief Nursing Officer and the Director of DOU reviewed policy and procedures titled Plan for the Provision of Patient Care and Services and Nurse Staffing Plan with no changes.
The Director of DOU reviewed Title 22 California Code of Regulations in regards to staffing requirements with unit managers.

Completion Date: 07/13/2022

Other Corrective Actions:

The Director of DOU reviewed Title 22 California Code of Regulations in regard to staffing requirements with unit managers.

- Proactive review and management of nursing schedules to maximize staffing:
 - Chief Nursing Officer, Directors, and Staffing Manager complete a twice weekly look ahead of staffing needs based on current census/acuity for all Nursing units.
 - Directors/Managers balance schedules, managing sick calls, ensuring appropriate leave of absence follow-up, managers in care when possible and after exhausting all efforts to obtain safe staffing.
 - Calls are made in advance of shifts and throughout the day/night.
 - Mass notifications to all RNs through our messaging center- Everbridge with shifts available
 - Bonuses offered for critically short days if normal balancing and asking for additional shifts is not effective.
- Continue arrangements with Traveler Agencies for 13 week travelers and 4 week Rapid deployment Traveler Nurses
- Pulling staff from other departments and redirecting staff from non-clinical activities to direct patient care needs:



Fountain Valley
Regional Hospital
Tenet Health Pacific Coast



- Consider acceptance of patient volume via direct admissions by the CNO/AOC.
- Operationalizing Surge Plan and possibly closing transfer center.

Completion Date: 07/15/2022

Education & Training:

The Director of 4 East Telemetry/Oncology reviewed Title 22 California Code of Regulations and the Plan for the Provision of Patient Care and Services with the management staff, with emphasis on maintaining the patient ratio for 4E as well as ensuring nurse patient ratio is maintained during staff break coverage per Title 22 with the department manager during their huddle.

Completion Date: 07/19/2022

Monitoring:

The Director of 4 East Telemetry/Oncology or their designee will monitor nurse patient ratio and break coverage every shift to ensure ratio is compliant with Title 22 California Code of Regulations with 100% compliance, if unable, all efforts/attempts to maintain ratio will be documented. Any areas of concern/shortages are immediately reported up to Nursing Leadership for review and action as required.

The results of the audits will be reported to Nursing Leadership, Quality Patient Care Committee and Medical Executive Committee at least quarterly as part of the performance improvement plan.

Responsible Personnel:

Director of 4 East Telemetry/Oncology

Disciplinary Action:

Noncompliance with corrective action by hospital staff will result in immediate remediation and the proper disciplinary action in accordance with the hospital's Human Resources Policies and Procedures.



Fountain Valley
Regional Hospital
Tenet Health Pacific Coast



- Redirected visitor entrance COVID screening personnel.
- Floating resource Nurses from other units/departments to act as resources to department facing staffing challenges- Team Nursing
- Placed a FT lift employee in CCU to assist with turning, etc. –
- Redirected the transport RNS to CCU and DOU to act as resource Nurses between transport calls- Team Nursing
- Recruitment and Retention Efforts
 - Increasing pool of applicant RNs by allowing Associate in Science in Nursing (ASN) Nurses to be hired
 - Sign on bonuses increased
 - Referral bonuses increased
 - Increased number of recruitment events and advertising
 - Continued recruitment of key leadership.
- Review elective procedure admissions by CNO and COO.
- Consider acceptance of patient volume via direct admissions by the CNO/AOC.
- Operationalizing Surge Plan and possibly closing transfer center.

Completion Date: 07/15/2022

Education & Training:

The Director of DOU reviewed Title 22 California Code of Regulations and the Plan for the Provision of Patient Care and Services with the management staff, with emphasis on maintaining the patient ratio for DOU as well as ensuring nurse patient ratio is maintained during staff break coverage per Title 22 with the Department Manager during their huddle.

Completion Date: 07/19/2022

Monitoring:

The Director of DOU or their designee will monitor nurse patient ratio and break coverage every shift to ensure ratio is compliant with Title 22 California Code of Regulations with 100% compliance, if unable, all efforts/attempts to maintain ratio will be documented. Any areas of concern/shortages are immediately reported up to Nursing Leadership for review and action as required.

The results of the audits will be reported to Nursing Leadership, Quality Patient Care Committee and Medical Executive Committee at least quarterly as part of the performance improvement plan.

Responsible Personnel:

Director of DOU

Disciplinary Action:

Noncompliance with corrective action by hospital staff will result in immediate remediation and the proper disciplinary action in accordance with the hospital's Human Resources Policies and Procedures.



Fountain Valley
Regional Hospital
Tenet Health Pacific Coast



Tag E307

Policies & Procedures:

The Chief Nursing Officer and the Director of DOU reviewed policy and procedures titled Plan for the Provision of Patient Care and Services and Nurse Staffing Plan with no changes.

The Director of DOU reviewed Title 22 California Code of Regulations in regards to staffing requirements with unit managers.

Completion Date: 07/13/2022

Other Corrective Actions:

The Director of DOU reviewed Title 22 California Code of Regulations in regard to staffing requirements with unit managers.

- Proactive review and management of nursing schedules to maximize staffing:
 - Chief Nursing Officer, Directors, and Staffing Manager complete a twice weekly look ahead of staffing needs based on current census/acuity for all Nursing units.
 - Directors/Managers balance schedules, managing sick calls, ensuring appropriate leave of absence follow-up, managers in care when possible and after exhausting all efforts to obtain safe staffing.
 - Calls are made in advance of shifts and throughout the day/night.
 - Mass notifications to all RNs through our messaging center- Everbridge with shifts available
 - Bonuses offered for critically short days if normal balancing and asking for additional shifts is not effective.
- Continue arrangements with Traveler Agencies for 13 week travelers and 4 week Rapid deployment Traveler Nurses
- Pulling staff from other departments and redirecting staff from non-clinical activities to direct patient care needs:
 - Redirected visitor entrance COVID screening personnel.
 - Floating resource Nurses from other units/departments to act as resources to department facing staffing challenges- Team Nursing
 - Placed a FT lift employee in CCU to assist with turning, etc. —
 - Redirected the transport RNS to CCU and DOU to act as resource Nurses between transport calls- Team Nursing
- Recruitment and Retention Efforts
 - Increasing pool of applicant RNs by allowing Associate in Science in Nursing (ASN) Nurses to be hired
 - Sign on bonuses increased
 - Referral bonuses increased
 - Increased number of recruitment events and advertising
 - Continued recruitment of key leadership.
- Review elective procedure admissions by CNO and COO.