



January 4, 2025

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RE: CCS Non-Compliance at Kaiser Permanente Fontana Medical Center's Community  
NICU and PICU

Dear Ms. Phillip, Mr. Billingsley and Ms. Watkins-Breschi:

On behalf of the National Union of Healthcare Workers (NUHW), I am submitting a complaint regarding Kaiser Permanente Fontana Medical Center (KPFMC) and its failure to meet a number of the provider standards and requirements of participation of the California Children's Services (CCS) program as defined in the CCS Manual of Procedures for Community Neonatal intensive Care Units (NICUs) and Pediatric Intensive Care Units (PICUs). As a result of these violations, CCS patients and their families are at risk of not receiving the care to which they are entitled and for which the state and county reimburse Kaiser Permanente as a carve-out from Medi-Cal managed care plans.

## I. Summary

NUHW represents Medical Social Workers (MSWs) employed at Kaiser's acute-care hospitals throughout Southern California, including those who provide social work services to PICU and NICU patients and their families. These staff members provide core services, care and support to these patients and their families, including psychosocial assessments, critical resource coordination, emotional support and counseling.

KPFMC, a general acute-care hospital licensed for 450 beds in San Bernardino County, is approved by CCS for five Specialty Care Center Types, including an Approved Community NICU (Center [# 7.13.25](#)) and an approved PICU (Center [#7.25.32](#)). CCS

requires NICUs and PICUs to follow specific rules in order to become licensed Specialty Care Centers and serve CCS patients.

KPFMC has failed and continues to fail to meet a number of these CCS requirements. Its failures have become more acute since NUHW members, including MSWs at KPFMC, began a strike of indeterminate length on October 21, 2024. For example, social work services in KPFMC's CCS PICU and CCS Community NICU have not been provided by CCS-paneled MSWs as required by the CCS Manual of Procedures. In some cases, social work services were not even provided by a staffer licensed to practice as a social worker by the California Board of Behavioral Sciences.

This complaint outlines a number of additional violations of CCS requirements, including KPFMC's failure to meet MSW-to-patient ratios in the Community NICU as well as MSW caseload maximums in the PICU. Furthermore, KPFMC appears to be failing to meet CCS standards requiring care coordination by a multi-disciplinary group.

Appropriately trained, licensed and impaneled MSWs are essential for providing care and services to CCS patients and their families. The CCS program is designed to serve children with acute or chronic medical conditions and their families, who often have higher levels of social service and psychological needs. CCS's rules establish specific timelines, care guidelines, and assessment protocols for the provision of social work services to CCS patients in NICUs and PICUs. Families come to NICUs with very sick babies, and mothers are often in acute psychological distress. CCS-paneled MSWs provide short term counseling to these post-partum mothers. Also, NICU babies are at higher risk for developmental disabilities. MSWs provide critical information to families about such risks and their implications for newborns and their future care. They also connect families to crucial support services and benefits such as SSI and regional centers.

KPFMC's failure to meet the CCS program's social work standards means these vulnerable patients and families are at risk of not receiving the full range of services they need and to which they are entitled even as Kaiser bills the state and county for these services.

## **II. Regulations and Non-Compliance**

[California Children's Services \(CCS\) Manual of Procedures](#) contains operative policies for the CCS program as well as requirements for participation. [Chapter 3.25.2](#) details these standards for Community Neonatal Intensive Care Units.

## A. NICU CCS-paneled MSW

Subsection (F)(5)(a) outlines the standards for NICU MSWs as follows:

*a. Social work services shall be provided in the NICU by a CCS-paneled MSW holding a master's degree in social work who has expertise in psychosocial issues affecting the families of seriously ill neonates/infants.*

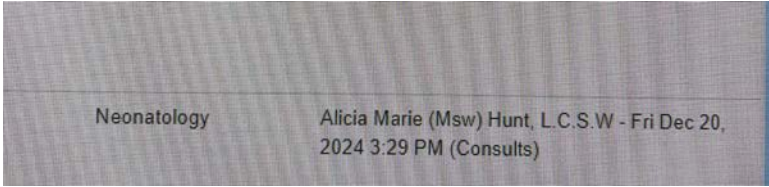
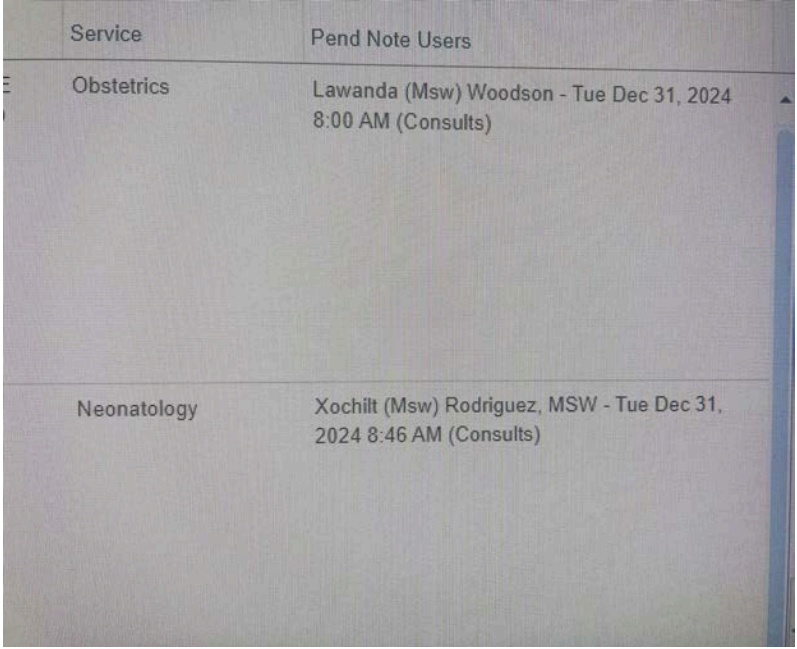
Through interviews with staff working at KPFCM, we understand that KPFCM has been assigning MSWs who are not CCS-paneled to staff its NICU. Furthermore, it is unclear whether these MSWs have “expertise in psychosocial issues affecting the families of seriously ill neonates/infants.” Since October 21, 2024, Alicia Marie Hunt has served as the primary replacement MSW assigned to the NICU. Ms. Hunt is not CCS-paneled. When Ms. Hunt is not working, KPFCM assigns other replacement staff to provide social work services to NICU patients and their families. Including Ms. Hunt, we have the names of seven MSWs who we believe have been providing social work services to NICU patients. Only one of these MSWs is CCS-paneled. Assigning the six non-CCS-paneled MSWs to staff KPFCM’s CCS Community NICU constitutes a clear violation of Chapter 2.25.2 subsection (F)(5)(a).

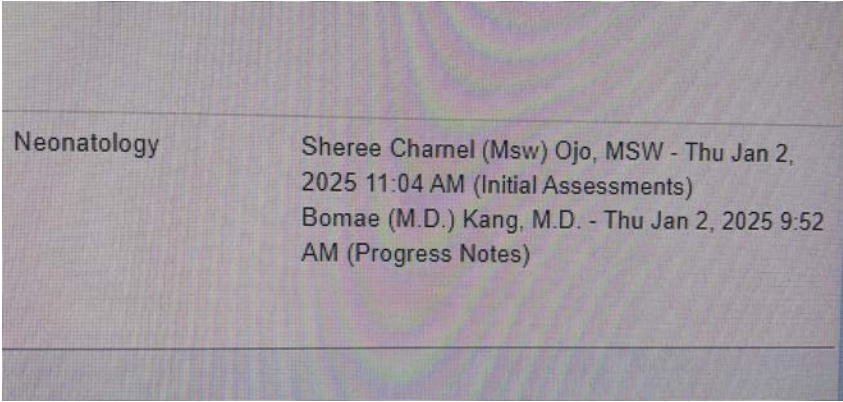
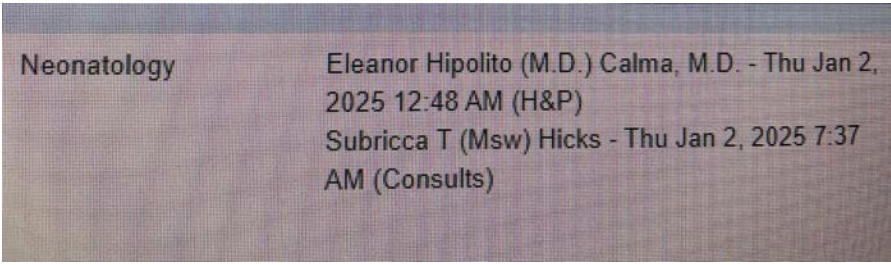
The following chart indicates the names of the aforementioned MSWs and some of the dates when they provided this care to NICU patients. The chart also indicates whether or not the MSW is CCS-paneled, registered as an Associate Social Worker (ASW) with the California Board of Behavioral Sciences (BBS), or licensed as a Licensed Clinical Social Worker (LCSW) with BBS.

<b>Name</b>	<b>Dates Working w/ NICU Patients</b>	<b>CCS-Paneled?</b>	<b>LCSW or ASW with BBS?</b>
Alicia Marie Hunt	12/20/24	No	LCSW
Marquita Mooney	12/18/24, 12/19/24	No	No
Lawanda Woodson	12/18/24, 12/19/24, 12/23/24, 12/24/24,	No	No
Nakeitha Weston	12/23/24, 12/24/24	No	No

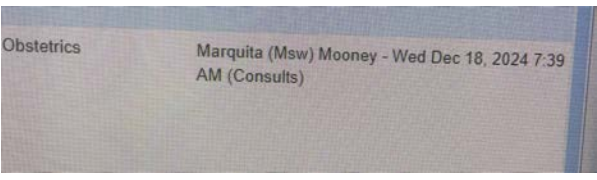
Xochilt Rodriguez	12/31/24	Yes (EPSDT Only)	ASW
Sheree Chamel Ojo	1/2/24	No	No
Subricca T Hicks	1/2/24	No	No

Kaiser’s internal record-keeping systems provide evidence to support the aforementioned violations. The images below are excerpts from “HealthConnect,” Kaiser’s electronic medical records system, indicating the assignment of the individuals named above to patients in the NICU on various dates during December 2024 and January 2025. The records indicate that these individuals carried out social work services for patients in these units, including “consults.”

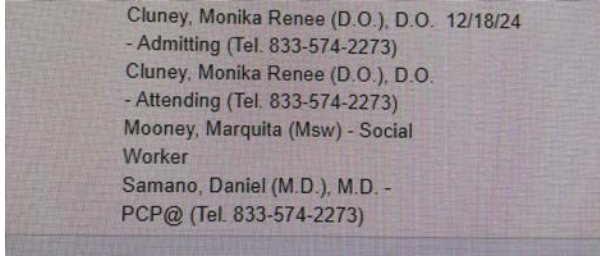
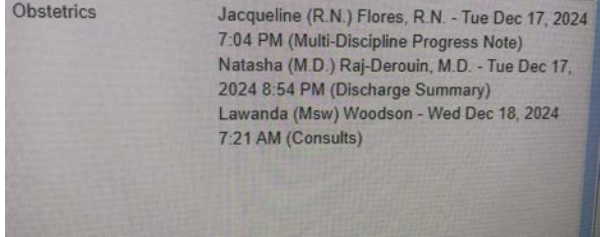
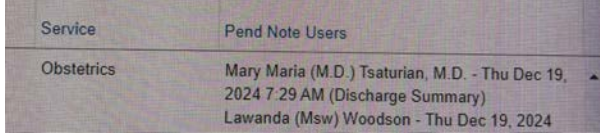
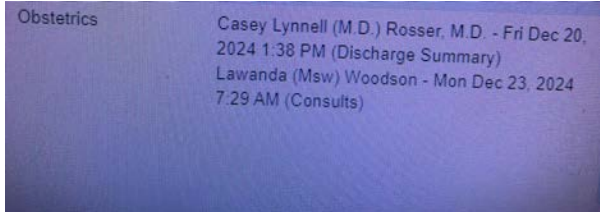
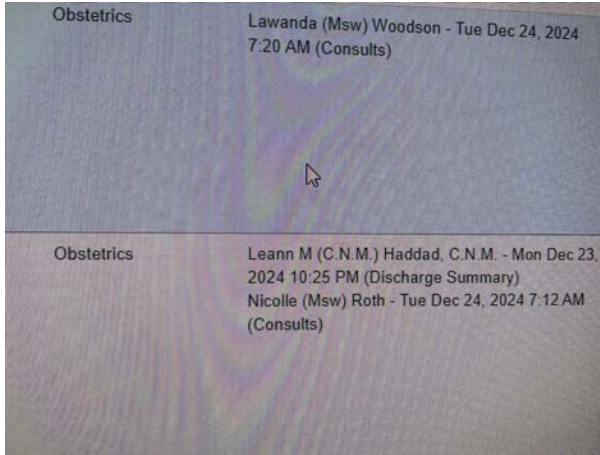
<p>This image indicates that Alicia Marie Hunt wrote a note in the chart of a KPFCM neonatology (NICU) patient on December 20, 2024.</p>	
<p>This image indicates that Xochilt Rodriguez wrote a note for a KPFCM neonatology (NICU) patient on December 31, 2024.</p>	

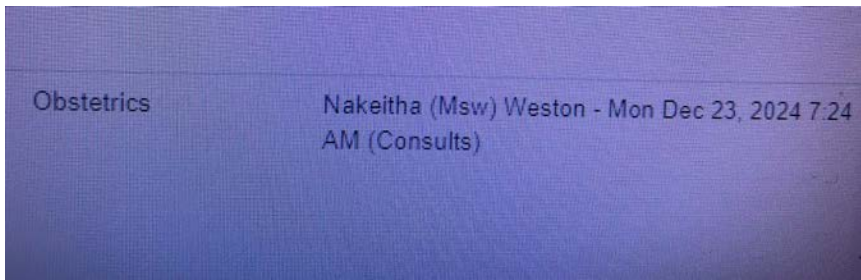
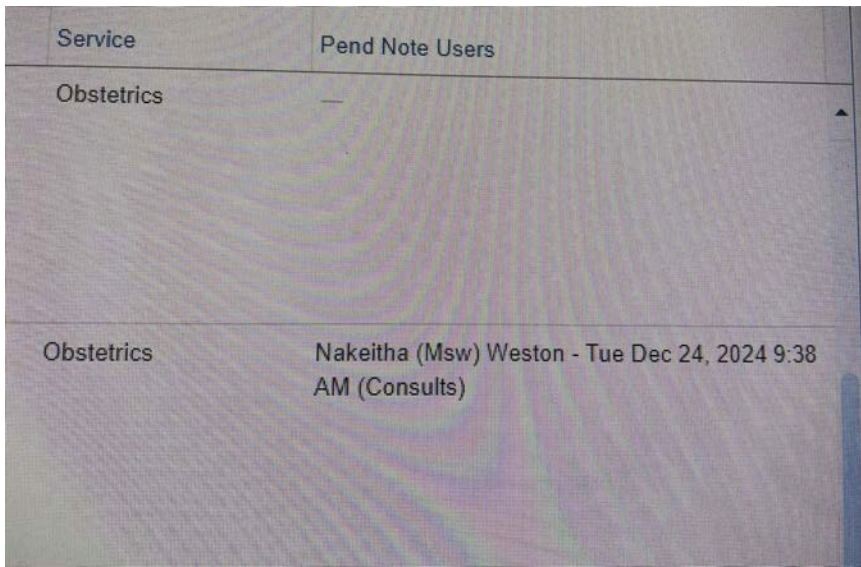
<p>This image indicates that Sheree Chamel Ojo wrote a note for a KPFCM neonatology (NICU) patient on January 2, 2025.</p>	
<p>This image indicates that Subricca T Hicks wrote a note for a KPFCM neonatology (NICU) patient on January 2, 2025.</p>	

The images below are additional excerpts from “HealthConnect,” Kaiser’s electronic medical records system, indicating the assignment of individuals named above to patients in the obstetrics department on various dates during December 2024. They confirm that these staff provided social work services to patients in KPFCM’s obstetrics department, which is in the mother and baby unit at KPFCM, in which the NICU is also housed. Through interviews with staff, we believe the following MSWs were working in KPFCM’s CCS Community NICU to provide social services to patients.

<p>This image indicates that Marquita Mooney wrote a note for a KPFCM obstetrics patient on December 18, 2024.</p>	
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<p>This image indicates that Marquita Mooney wrote a note for a KPFMC obstetrics patient on December 18, 2024.</p>	 <p>Cluney, Monika Renee (D.O.), D.O. 12/18/24      - Admitting (Tel. 833-574-2273)      Cluney, Monika Renee (D.O.), D.O.      - Attending (Tel. 833-574-2273)      Mooney, Marquita (Msw) - Social Worker      Samano, Daniel (M.D.), M.D. - PCP@ (Tel. 833-574-2273)</p>				
<p>This image indicates that Lawanda Woodson wrote a note for a KPFMC obstetrics patient on December 18, 2024.</p>	 <p>Obstetrics      Jacqueline (R.N.) Flores, R.N. - Tue Dec 17, 2024 7:04 PM (Multi-Discipline Progress Note)      Natasha (M.D.) Raj-Derouin, M.D. - Tue Dec 17, 2024 8:54 PM (Discharge Summary)      Lawanda (Msw) Woodson - Wed Dec 18, 2024 7:21 AM (Consults)</p>				
<p>This image indicates that Lawanda Woodson wrote a note for a KPFMC obstetrics patient on December 19, 2024.</p>	 <table border="1"> <thead> <tr> <th>Service</th> <th>Pend Note Users</th> </tr> </thead> <tbody> <tr> <td>Obstetrics</td> <td>Mary Maria (M.D.) Tsaturian, M.D. - Thu Dec 19, 2024 7:29 AM (Discharge Summary)                      Lawanda (Msw) Woodson - Thu Dec 19, 2024</td> </tr> </tbody> </table>	Service	Pend Note Users	Obstetrics	Mary Maria (M.D.) Tsaturian, M.D. - Thu Dec 19, 2024 7:29 AM (Discharge Summary) Lawanda (Msw) Woodson - Thu Dec 19, 2024
Service	Pend Note Users				
Obstetrics	Mary Maria (M.D.) Tsaturian, M.D. - Thu Dec 19, 2024 7:29 AM (Discharge Summary) Lawanda (Msw) Woodson - Thu Dec 19, 2024				
<p>This image indicates that Lawanda Woodson wrote a note for a KPFMC obstetrics patient on December 23, 2024.</p>	 <p>Obstetrics      Casey Lynnell (M.D.) Rosser, M.D. - Fri Dec 20, 2024 1:38 PM (Discharge Summary)      Lawanda (Msw) Woodson - Mon Dec 23, 2024 7:29 AM (Consults)</p>				
<p>This image indicates that Lawanda Woodson wrote a note for a KPFMC obstetrics patient on December 24, 2024 and Nicolle Roth wrote a note on December 24, 2024.</p>	 <p>Obstetrics      Lawanda (Msw) Woodson - Tue Dec 24, 2024 7:20 AM (Consults)</p> <p>Obstetrics      Leann M (C.N.M.) Haddad, C.N.M. - Mon Dec 23, 2024 10:25 PM (Discharge Summary)      Nicolle (Msw) Roth - Tue Dec 24, 2024 7:12 AM (Consults)</p>				

<p>This image indicates that Nakeitha Weston wrote a note for a KPFCM obstetrics patient on December 23, 2024.</p>	 <p>Obstetrics Nakeitha (Msw) Weston - Mon Dec 23, 2024 7:24 AM (Consults)</p>						
<p>This image indicates that Nakeitha Weston wrote a note for a KPFCM obstetrics patient on December 24, 2024.</p>	 <table border="1"> <thead> <tr> <th>Service</th> <th>Pend Note Users</th> </tr> </thead> <tbody> <tr> <td>Obstetrics</td> <td>—</td> </tr> <tr> <td>Obstetrics</td> <td>Nakeitha (Msw) Weston - Tue Dec 24, 2024 9:38 AM (Consults)</td> </tr> </tbody> </table>	Service	Pend Note Users	Obstetrics	—	Obstetrics	Nakeitha (Msw) Weston - Tue Dec 24, 2024 9:38 AM (Consults)
Service	Pend Note Users						
Obstetrics	—						
Obstetrics	Nakeitha (Msw) Weston - Tue Dec 24, 2024 9:38 AM (Consults)						

According to KPFCM staff members, these six non-paneled individuals – as well as other non-paneled social workers – provided social work services to dozens of NICU patients and their families on many days from October 21, 2024 through the present.

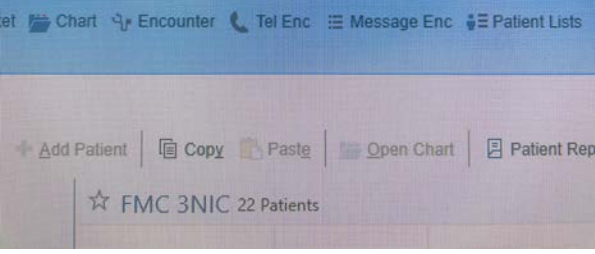
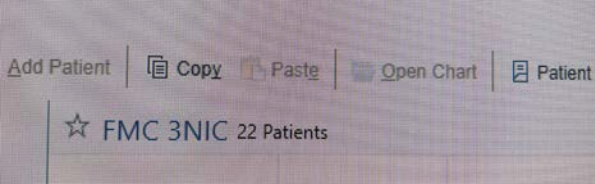
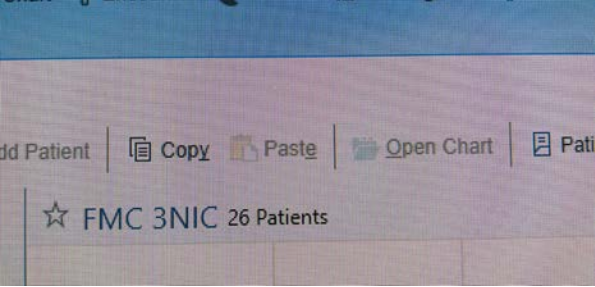
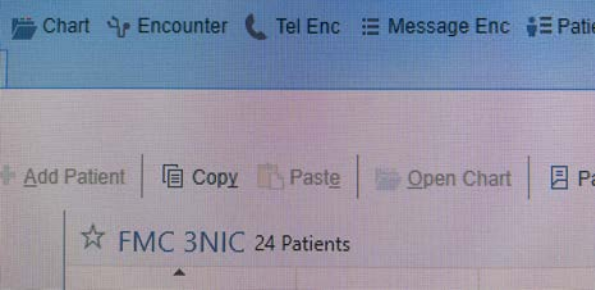
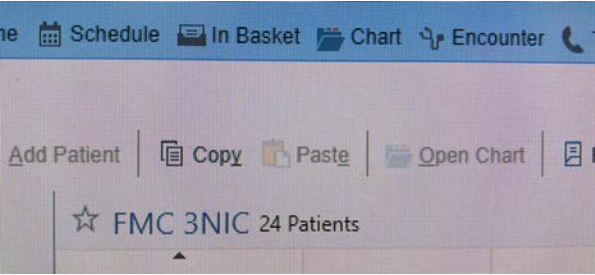
**B. NICU Patient-to-MSW Ratio**

Subsection (F)(5)(b) describes the minimum allowable staffing standards for MSWs in CCS Community NICUs as follows:

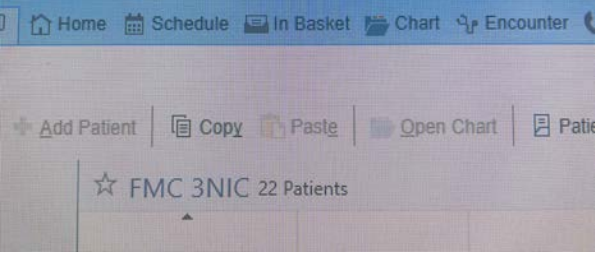
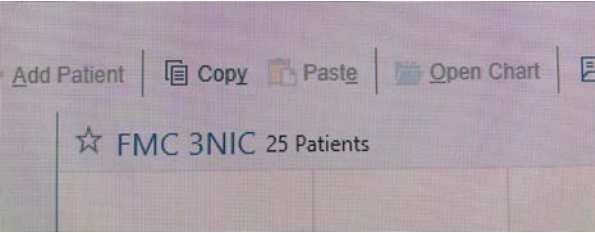
*b. For every 15 patients in the NICU, there shall be one full-time equivalent MSW.*

According to KPFCM staff, the hospital has violated this rule for many months during the past three years. Since October 21, 2024, KPFCM’s understaffing of its 28-bed NICU has worsened, with KPFCM reportedly violating CCS’s minimum staffing ratio on most days. The following images are excerpts from Kaiser’s “HealthConnect” system

and indicate the patient census of KPFFMC's NICU for six days in December 2024 and one day in January 2025.

<p>This image indicates that there were 22 patients in the KPFFMC CCS Community NICU on December 18, 2024.</p>	 A screenshot of a medical software interface. The top navigation bar includes icons for 'Chart', 'Encounter', 'Tel Enc', 'Message Enc', and 'Patient Lists'. Below the navigation bar, there are buttons for 'Add Patient', 'Copy', 'Paste', 'Open Chart', and 'Patient Rep'. A star icon is followed by the text 'FMC 3NIC 22 Patients'.
<p>This image indicates that there were 22 patients in the KPFFMC CCS Community NICU on December 19, 2024.</p>	 A screenshot of a medical software interface, similar to the first one. It shows the same navigation bar and buttons. The text below the buttons reads 'FMC 3NIC 22 Patients'.
<p>This image indicates that there were 26 patients in the KPFFMC CCS Community NICU on December 20, 2024.</p>	 A screenshot of a medical software interface. The text below the navigation bar and buttons reads 'FMC 3NIC 26 Patients'.
<p>This image indicates that there were 24 patients in the KPFFMC CCS Community NICU on December 23, 2024.</p>	 A screenshot of a medical software interface. The text below the navigation bar and buttons reads 'FMC 3NIC 24 Patients'.
<p>This image indicates that there were 24 patients in the KPFFMC CCS Community NICU on December 27, 2024.</p>	 A screenshot of a medical software interface. The top navigation bar includes icons for 'Schedule', 'In Basket', 'Chart', 'Encounter', and a phone icon. The text below the navigation bar and buttons reads 'FMC 3NIC 24 Patients'.



<p>This image indicates that there were 22 patients in the KPFMC CCS Community NICU on December 31, 2024.</p>	
<p>This image indicates that there were 25 patients in the KPFMC CCS Community NICU on January 2, 2025.</p>	

Date	# of Patients in NICU	# of MSWs Assigned	MSW Assigned to NICU
12/18/24	22	Nobody - "Rotate"	N/A
12/19/24	22	Nobody - "Rotate"	N/A
12/20/24	26	1	Alicia Marie Hunt (Not CCS-Paneled)
12/23/24	24	Nobody - "Rotate"	N/A
12/27/24	24	Nobody - "Rotate"	N/A
12/31/24	22	1	Xochitl Rodriguez (CCS-Paneled)
1/2/24	25	Nobody - "Rotate"	N/A

According to KPFMC staff, the patient census of KPFMC’s NICU often has exceeded 15 patients since October 21, 2024. Nonetheless, KPFMC has consistently assigned only one MSW, such as Ms. Hunt (who is not CCS-paneled), to provide social work services to NICU patients and their families. For example, on December 20, 2024, KPFMC assigned only a single social worker to provide social work services to 26 NICU patients and their families, exceeding the minimum 1:15 staffing ratio. This happened again on

December 31, 2024, when KPFCM assigned only Xochitl Rodriguez (CCS-paneled) to provide social work services to 22 NICU patients and their families, exceeding the minimum 1:15 staffing ratio, in clear violation of Subsection (F)(5)(b).

On those days when neither Ms. Hunt nor Ms. Rodriguez was working at the hospital, KPFCM did not replace them with social worker(s) dedicated specifically to the NICU. Instead, it instructed social workers assigned to other hospital units to try to respond to requests for social work services in the NICU in addition to other duties. This is what KPFCM calls “rotating.” Typically, KPFCM assigns MSWs to “rotate” on holidays when there are too few MSWs to cover each department. However, since October 21, 2024, “rotating” social workers has become a regular practice at KPFCM and its CCS Community NICU.<sup>1</sup>

Prior to October 21, 2024, KPFCM’s practice was to assign dedicated MSWs to specific departments, including the NICU, during non-holiday days. These MSWs were stationed at desks in their respective areas so they could respond to patients’/families’ needs as they arose, check on patients and families, and perform their required work. Since October 21, 2024, KPFCM has assigned fewer MSWs to float between departments and patients throughout the hospital. The “rotating” MSWs were only directed to the NICU when specific consults were required and when time permitted. This practice appears to violate the minimum MSW-to-patient staffing ratio required by the CCS program.

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<sup>1</sup> Prior to October 21, 2024, either KPFCM’s Assistant Director of Social Services, Leonila Araneta or the Director of Social Services, Sally A Morales, sent daily emails to the hospital’s MSWs and scheduling clerks containing the day’s assignments. The emails contained charts indicating each MSW’s assignment to a specific department in the hospital. Since October 21, 2024, when KPFCM began its practice of regularly “rotating” fewer MSWs across the entire hospital, Ms. Araneta and Ms. Morales ceased assigning dedicated MSWs to the NICU on most days. Instead, they assigned the NICU to their “rotating” system. Under this system, as requests for social work services are reported, a scheduling clerk directs individual MSWs to particular patients in various departments across the hospital using a HealthConnect Teams group chat function. With respect to the daily emails containing MSW staffing assignments, the emails’ staffing charts may be inaccurate on some days. The staffing chart may indicate that the NICU is being “rotate[d]”, when it is not. Confirmation of how Kaiser is staffing the NICU and other departments can be obtained by reviewing emails by and between the scheduling clerk, the Social Services Director, and the Assistant Director as well as the group “Teams Chat” messages by and between scheduling clerks and MSWs.

KPFMC's Social Work Assignments from December 18, 2024. NICU was "rotated" rather than having dedicated MSWs assigned to its patients.

A	B	C
I8	Shelly-Ann	75726
I9	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE
PEDS	ROTATE	ROTATE
4N-ICU (401-410)	ROTATE	ROTATE
2N (200-220)	ROTATE	ROTATE
2S (221-240)	Mylene	76490
ORTHO	Mylene	76490
SURGICAL (7N)	Mylene	76490
ER	8:30AM-2:30PM ROTATE	ROTATE
Evening	2:30PM-11:00PM John	76497

KPFMC's Social Work Assignments from December 19, 2024. NICU was "rotated" rather than having dedicated MSWs assigned to its patients.

**Fontana Social Work Assignments 12/19/2024**  
 If No Answer, Please Leave Message as Social Worker May Be With A Patient.

MAIN LINE 8:30 am-5:00 pm (909) 427-5191, Evening Pager 5:00 pm-11:00 pm (909) 459-3974

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	Marlene R.	72518
4	Marlene R.	72518
5	Marlene R.	72518
6	Marlene R.	72518
7	Marlene R.	72518
8	ROTATE	ROTATE
9	ROTATE	ROTATE
10	ROTATE	ROTATE
11	ROTATE	ROTATE
12	ROTATE	ROTATE
13	ROTATE	ROTATE
Neuro I5 (Rooms 501-512)	Mylene	76490
Neuro I5 (Rooms 513-524)	Shelly-Ann	75726
I6	Shelly-Ann	75726
I8	Shelly-Ann	75726
I9	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE

KPFMC's Social Work Assignments from December 20, 2024. NICU was "rotated" rather than having dedicated MSWs assigned to its patients.<sup>2</sup>

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	Marlene R.	72518
4	Marlene R.	72518
5	Marlene R.	72518
6	Marlene R.	72518
7	Marlene R.	72518
8	ROTATE	ROTATE
9	ROTATE	ROTATE
10	ROTATE	ROTATE
11	ROTATE	ROTATE
12	ROTATE	ROTATE
13	ROTATE	ROTATE
Neuro 15 (Rooms 501-512)	Mylene	76490
Neuro 15 (Rooms 513-524)	Shelly-Ann	75726
16	Shelly-Ann	75726
18	Shelly-Ann	75726
19	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE
PEDS	ROTATE	ROTATE
4N-ICU (401-410)	ROTATE	ROTATE
2N (200-220)	ROTATE	ROTATE
25 (221-240)	Mylene	76490
ORTHO	Mylene	76490
SURGICAL (7N)	Mylene	76490
ER	8:30AM-2:30PM ROTATE	ROTATE
Evening	2:30PM-11:00PM ROTATE	ROTATE

KPFMC's Social Work Assignments from December 23, 2024. NICU was "rotated" rather than having dedicated MSWs assigned to its patients.

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	ROTATE	ROTATE
4	ROTATE	ROTATE
5	ROTATE	ROTATE
6	ROTATE	ROTATE
7	ROTATE	ROTATE
8	Breyana	75799
9	Breyana	75799
10	Breyana	75799
11	Breyana	75799
12	Breyana	75799
13	Breyana	75799
Neuro 15 (Rooms 501-512)	ROTATE	ROTATE
Neuro 15 (Rooms 513-524)	Shelly-Ann	75726
16	Shelly-Ann	75726
18	Shelly-Ann	75726
19	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE

<sup>2</sup> December 19th, 2024, is one of the instances where we believe the staffing chart is inaccurate. After interviewing KPFMC staff, we believe that the NICU was actually assigned solely to Alicia Marie Hunt on this day.



KPFMC's Social Work Assignments from December 27, 2024. NICU was "rotated" rather than having a dedicated MSW assigned to its patients.

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	ROTATE	ROTATE
4	ROTATE	ROTATE
5	ROTATE	ROTATE
6	ROTATE	ROTATE
7	ROTATE	ROTATE
8	Breyana	75799
9	Breyana	75799
10	Breyana	75799
11	Breyana	75799
12	Breyana	75799
13	Breyana	75799
Neuro 15 (Rooms 501-512)	ROTATE	ROTATE
Neuro 15 (Rooms 513-524)	ROTATE	ROTATE
16	ROTATE	ROTATE
18	ROTATE	ROTATE
19	ROTATE	ROTATE
X	ROTATE	ROTATE
Y	ROTATE	ROTATE
Z	ROTATE	ROTATE
PACU	ROTATE	ROTATE
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE

KPFMC's Social Work Assignments from December 31, 2024. NICU was "rotated" rather than having a dedicated MSW assigned to its patients.<sup>3</sup>

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	ROTATE	ROTATE
4	ROTATE	ROTATE
5	ROTATE	ROTATE
6	ROTATE	ROTATE
7	ROTATE	ROTATE
8	Breyana	75799
9	Breyana	75799
10	Breyana	75799
11	Breyana	75799
12	Breyana	75799
13	Breyana	75799
Neuro 15 (Rooms 501-512)	ROTATE	ROTATE
Neuro 15 (Rooms 513-524)	Shelly-Ann	75726
16	Shelly-Ann	75726
18	Shelly-Ann	75726
19	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	ROTATE	ROTATE
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE

<sup>3</sup> December 31st, 2024, is one of the instances where we believe the staffing chart is inaccurate. After interviewing KPFMC staff, we believe that the NICU was actually assigned solely to Xochilt Rodriguez on this day.

KPFMC's Social Work Assignments from January 2, 2024. NICU was "rotated" rather than having a dedicated MSW assigned to its patients.

TEAMS	SOCIAL WORKER	CISCO NUMBER
3	ROTATE	ROTATE
4	ROTATE	ROTATE
5	ROTATE	ROTATE
6	ROTATE	ROTATE
7	ROTATE	ROTATE
8	Brejana	75799
9	Brejana	75799
10	Brejana	75799
11	Brejana	75799
12	Brejana	75799
13	Brejana	75799
Neuro 15 (Rooms 501-512)	ROTATE	ROTATE
Neuro 15 (Rooms 513-524)	Shelly-Ann	75726
16	Shelly-Ann	75726
18	Shelly-Ann	75726
19	Shelly-Ann	75726
X	Shelly-Ann	75726
Y	Shelly-Ann	75726
Z	Shelly-Ann	75726
PACU	Shelly-Ann	75726
FCC	Shelly-Ann	75726
L&D/LD Triage	ROTATE	ROTATE
NICU	ROTATE	ROTATE
PICU	ROTATE	ROTATE
	ROTATE	ROTATE

### C. NICU Multidisciplinary Team

Subsection (E)(6) and (E)(7) outline the organizational requirements for community NICUs as follows:

6. *There shall be an identified NICU multidisciplinary team:*
  - a. *Which shall have the responsibility for coordination of all aspects of patient care; and*
  - b. *Which shall consist of, at a minimum, a CCS-paneled neonatologist, a clinical nurse specialist (CNS), a respiratory care practitioner (RCP) and a CCS-paneled medical social worker (MSW) with current experience and practice in neonatal care and whose professional requirements are defined in Section 3.25.2/F. Optional members of the Community NICU multidisciplinary team may include, but are not limited to, the following: CCS-paneled clinical registered dietitian, CCS-paneled occupational therapist, and CCS-paneled physical therapist.*
  
7. *There shall be, at a minimum, weekly NICU multidisciplinary team conferences (rounds).*
  - a. *The NICU multidisciplinary team conference shall include representation from the NICU's medical, nursing, medical social service, RCP staff, and other specialists, i.e., the clinical registered dietitian, occupational therapist and physical therapist, when appropriate.*

Since October 21, 2024, KPFCM has violated this requirement because none of the MSWs assigned to the NICU is CCS-paneled. The Director of KPFCM's Social Services Department, Sally Morales, is CCS-paneled. She performs managerial duties rather than providing social work services to patients and families. If she has signed off on the NICU multidisciplinary team's notes, this would not satisfy Subsection E(6)'s requirements that the multidisciplinary team's MSW representative be "a CCS-paneled medical social worker (MSW) with current experience and practice in neonatal care." It would also likely violate Subsection E(6)(b) because she is likely unable to take on "the responsibility for coordination of all aspects of patient care" given her many other responsibilities and lack of experience working directly with NICU patients.

#### **D. NICU Care Requirements**

Subsection (H)(10) outlines the requirements for social work care at CCS community NICUs:

- 10. There shall be a MSW assigned to all patients upon admission to the NICU; and:*
  - a. A social work assessment shall be completed within two working days of admission.*
  - b. The social work assessment shall include an interview of at least one of the infant's parents or primary caretaker(s). The parent(s) or primary caretaker(s) shall be included as early as possible in the decision-making process(es) relating to the care of their infant.*
  - c. A preliminary case service plan shall be developed with the parent(s) or primary caretaker(s) within five working days of admission to the NICU which shall include, but not be limited to, assessment of the following: significant family stress factors, environmental factors, mental health factors, and any other psychosocial factors, and how these factors in the family will be addressed.*
  - d. Social work progress notes shall be completed at least on a weekly basis, or more often as indicated, and shall include psychosocial data, significant changes in the infant's family, updates and results of the implementation of the service plan and plans to continue contact with the family for ongoing support.*

In short, for each infant admitted to a CCS Community NICU, a CCS-paneled MSW must complete a social work assessment within two days of admission, develop a preliminary case service plan within five working days of admission, and complete progress notes on at least a weekly basis. KPFCM has failed to meet these

requirements. First, since October 21, 2024, only one of the MSWs providing social work services to KPFMC's NICU patients is CCS-paneled. Additionally, five of the seven MSWs assigned to the NICU are neither licensed as Licensed Clinical Social Workers nor registered as Associate Social Workers in California. Therefore, they are unable to provide clinical or therapeutic services in the state of California. One MSW is often responsible for 22-27 NICU patients as well as other patients outside of the NICU in the mother and baby unit rather than a maximum of 15 patients as required by CCS. KPFMC's understaffing of social work services means it is likely these social workers are unable to provide the social work services described in Subsection (H)(10) within the timeframes required by CCS.

#### **E. PICU CCS-Paneled MSW**

[Chapter 3.32](#) describes the standards required for Pediatric Intensive Care Units (PICUs) to participate in the CCS program.

Chapter 3.32 subsection (F)(4)(a) states the following:

*a. Social work services shall be provided in the PICU by a CCS-paneled medical social worker (MSW) holding a master's degree in social work and who has expertise in psychosocial issues affecting the families of seriously ill infants, children, and adolescents. The caseload per one full-time equivalent MSW shall not exceed twenty patients.*

Through interviews with staff working at KPFMC, we understand that KPFMC has been assigning MSWs who are not CCS-paneled to staff its CCS PICU. Additionally, it is unclear whether KPFMC has assigned MSWs to its PICU who have "expertise in psychosocial issues affecting the families of seriously ill infants, children, and adolescents."

Since October 21, 2024, KPFMC has assigned Nicole Roth as the primary MSW covering both the PICU and Pediatrics Unit. Ms. Roth is not CCS-paneled. When Ms. Roth is not working, KPFMC assigns other replacement staff to provide social work services to PICU patients and their families. Pamela Christine Bowers is another MSW who we believe has been providing social work services to PICU patients. She is also not CCS-paneled. This practice is in clear violation of Chapter 3.32 subsection (F)(4)(a).



The following chart indicates the names of the MSWs who have been providing social work services to dozens of PICU patients/families since October 21, 2024 and the dates when they provided this care. The chart also indicates whether or not each individual is CCS-paneled, registered as an Associate Social Worker (ASW) with the California Board of Behavioral Sciences (BBS), or licensed as a Licensed Clinical Social Worker (LCSW) with BBS.

<b>Name</b>	<b>Dates Working w/ PICU Patients</b>	<b>CCS-Paneled?</b>	<b>LCSW or ASW with BBS?</b>
Nicolle Roth	12/23/24, 12/31/24	No	LCSW
Pamela Christine Bowers	12/19/24	No	No

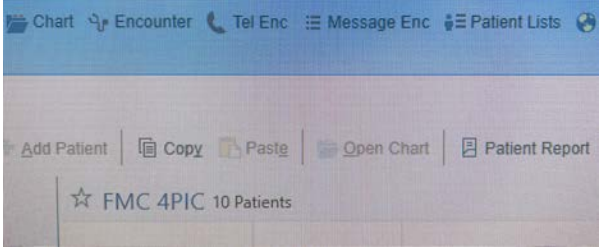
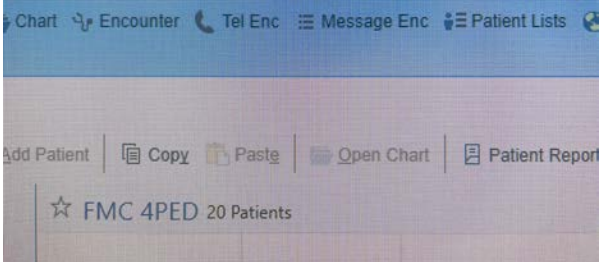

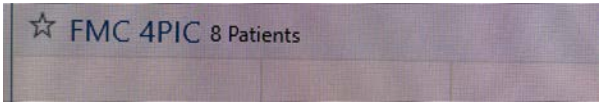
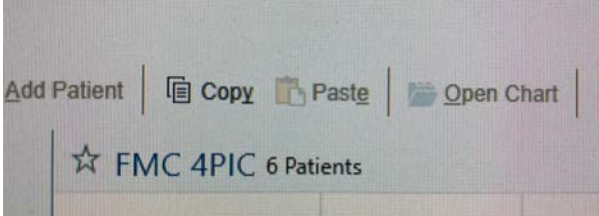
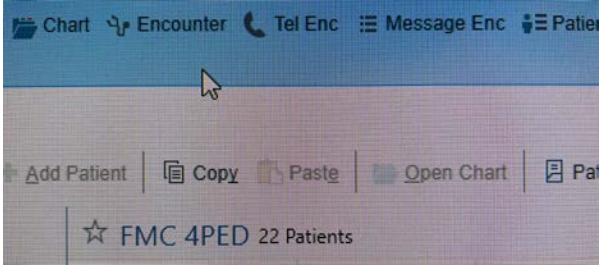
According to KPFCM staff members, these two individuals – as well as other non-paneled social workers – provided social work services to dozens of PICU patients and their families on many days from October 21, 2024 through the present.

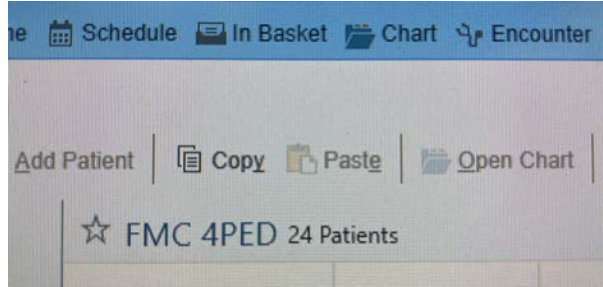
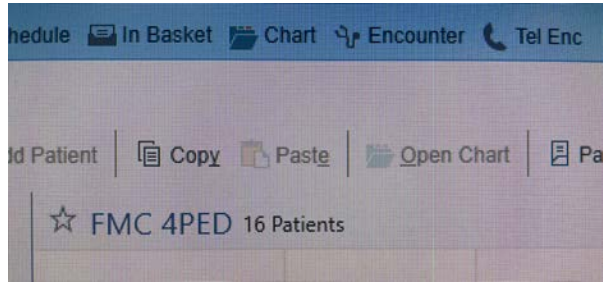
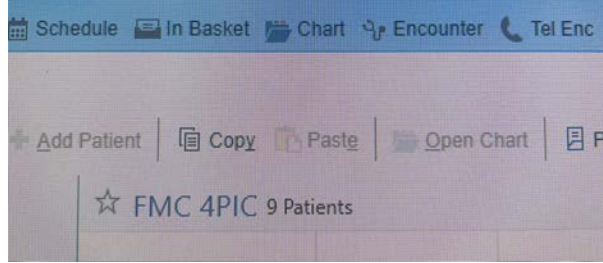
#### **F. PICU Caseload Maximum**

Chapter 3.32 subsection (F)(4)(b) outline the requirements for MSW staff in the PICU:

*b. The caseload per one full-time equivalent MSW shall not exceed twenty patients*

Since October 21, 2024, KPFCM often has assigned a single social worker to cover patients both in the 12-bed PICU and in the 25-bed Pediatrics Unit. Consequently, the caseload of the MSW attending to PICU patients often exceeded twenty patients. The following images, which have been excerpted from Kaiser’s “HealthConnect” system, indicate the patient census of KPFCM’s PICU and Pediatrics Unit for four days in December 2024 and one day in January 2025.

<p>This image indicates that there were 10 patients in the KPFMC CCS PICU on December 18, 2024.</p>	
<p>This image indicates that there were 20 patients in the KPFMC Pediatrics Unit on December 18, 2024.</p>	
<p>This image indicates that there were 16 patients in the KPFMC Pediatrics Unit on December 19, 2024.</p>	
<p>This image indicates that there were 8 patients in the KPFMC PICU on December 19, 2024.</p>	
<p>This image indicates that there were 6 patients in the KPFMC PICU on December 23, 2024.</p>	
<p>This image indicates that there were 22 patients in the KPFMC Pediatrics Unit on December 23, 2024.</p>	

<p>This image indicates that there were 24 patients in the KPFMC Pediatrics Unit on December 27, 2024.</p>	 <p>The screenshot shows a software interface with a blue header bar containing icons for 'Schedule', 'In Basket', 'Chart', and 'Encounter'. Below the header, there are buttons for 'Add Patient', 'Copy', 'Paste', and 'Open Chart'. A star icon is followed by the text 'FMC 4PED 24 Patients'.</p>
<p>This image indicates that there were 16 patients in the KPFMC Pediatrics Unit on January 2, 2025.</p>	 <p>The screenshot shows a software interface with a blue header bar containing icons for 'Schedule', 'In Basket', 'Chart', 'Encounter', and 'Tel Enc'. Below the header, there are buttons for 'Add Patient', 'Copy', 'Paste', 'Open Chart', and 'Pa'. A star icon is followed by the text 'FMC 4PED 16 Patients'.</p>
<p>This image indicates that there were 9 patients in the KPFMC Community PICU on January 2, 2025.</p>	 <p>The screenshot shows a software interface with a blue header bar containing icons for 'Schedule', 'In Basket', 'Chart', 'Encounter', and 'Tel Enc'. Below the header, there are buttons for 'Add Patient', 'Copy', 'Paste', 'Open Chart', and 'F'. A star icon is followed by the text 'FMC 4PIC 9 Patients'.</p>

The table below displays the patient census in KPFMC’s PICU and Pediatrics Unit for five days in December 2024 and one day in January 2025 as well as the resulting caseload for the MSW assigned to provide social work services to PICU patients and their families. Violations of CCS’s MSW caseload standard for PICUs have taken place repeatedly since October 21, 2024.

As documented in the images contained in Section II-B of this complaint, KPFMC rotated MSW in the PICU on certain days since October 21, 2024. On these days, we are unable to calculate the precise caseload of the MSWs assigned to cover PICU patients and families. However, we believe their caseloads exceeded the maximum limit per CCS standards (20 patients per 1.0 FTE MSW) given that KPFMC employs its “rotating” staffing system when it lacks sufficient MSWs to cover assignments as usual.

Date	# of Patients in PICU	# of Patients in Pediatrics	# of Patients Combined	# of MSWs Covering PICU and Pediatrics	PICU MSW Caseload
12/18/24	10	20	30	Unknown	Unknown
12/19/24	8	16	24	1	24
12/23/24	6	22	28	1	28
12/27/24	Unknown	24	24+	Nobody - "Rotate"	Unknown
12/31/24	Unknown	Unknown	Unknown	1	Unknown
1/2/25	9	16	25	Nobody - "Rotate"	Unknown

This table demonstrates that caseloads for MSWs in KPFCM's CCS PICU have often been above the twenty patient maximum as required by Chapter 3.32 subsection (F)(4)(b).

### **G. PICU Care Requirements**

Chapter 3.32 subsection (H)(10) requires the following:

- 10. There shall be a MSW assigned to all patients upon admission to the PICU; and:*
- a. A social work assessment shall be completed on suspected child abuse/neglect patients within 24-hours of identification or suspicion or prior to discharge, whichever comes first.*
  - b. A social work assessment shall be completed within two working days of admission or prior to discharge, whichever comes first.*
  - c. The social work assessment shall include an interview of at least one of the patient's parents or primary caretaker(s). The parent(s) or primary caretaker(s) shall be included as early as possible in the decision-making process(es) relating to the care of their child.*
  - d. A preliminary case service plan shall be developed with the parent(s) or primary caretaker(s) within three working days of admission to the PICU which*



*shall include, but not be limited to, assessment of the following: significant family stress factors, environmental factors, mental health factors, and any other psychosocial factors, and how these factors in the family will be addressed.*

*e. Social work progress notes shall be completed at least on a weekly basis, or more often as indicated, and shall include psychosocial data, significant changes in the patient's family, updates and results of the implementation of a service plan and plans to continue contact with the family for ongoing support*

In short, for each patient admitted to a CCS PICU, a CCS-paneled MSW must complete a social work assessment within two days of admission or prior to discharge (whichever comes first), develop a preliminary case service plan within three working days of admission, complete progress notes on at least a weekly basis, and complete a social work assessment on suspected child abuse/neglect patients within 24-hours of identification or suspicion or prior to discharge, whichever comes first. KPFCM is violating these standards. First, neither of the MSWs who are known to have provided social work services to KPFCM PICU patients since October 21, 2024 (i.e., Nicole Roth and Pamela Christine Bowers) is CCS-paneled. Second, Pamela Christine Bowers is neither licensed as a Licensed Clinical Social Worker nor registered as an Associate Social Worker with BBS. Therefore, she is unable to provide clinical or therapeutic services in the state of California. Lastly, due to the KPFCM's understaffing of social work services in its PICU, as described above, it is unlikely that MSWs have completed social work assessments, services plans, progress notes and other social work services in the timeframes required by CCS standards.

### **III. Request**

NUHW requests that CCS take urgent action to enforce its rules and to protect the rights of CCS patients and their families to receive care that meets the requirements of the CCS Manual of Procedures. Specifically, we request that CCS investigate KPFCM's provision of social work services to NICU and PICU patients and their families by conducting a review and audit of these services since October 21, 2024.<sup>4</sup> Additionally, we request that CCS evaluate KPFCM's billings for such services to CCS, Medi-Cal and other payors. We request that sanctions be imposed for any violations along with appropriate enforcement and monitoring to ensure that KPFCM fulfills the requirements of the CCS program.

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<sup>4</sup> According to Chapter 3.25.2.B.13 of the CCS Manual of Procedures, the CCS program may conduct periodic reviews of CCS-approved NICUs and PICUs as deemed necessary by the CCS program.

We stand ready to assist. Please contact me at [ckeegan@nuhw.org](mailto:ckeegan@nuhw.org) with any questions or requests.

Sincerely,

*Ciara Keegan*

cc: Rob Bonta, California Attorney General  
Mike McGuire, Senate President Pro Tempore  
Robert Rivas, Speaker of the Assembly  
Kim Johnson, Secretary, California Health and Human Services Agency  
Scott Wiener, Chair, Senate Select Committee on Mental Health  
Richard Roth, Senate Committee on Health  
Mia Bonta, Assembly Committee on Health