

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY  
DEPARTMENT OF PUBLIC HEALTH

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>055916</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/20/2009</b>
NAME OF PROVIDER OR SUPPLIER <b>KAWEAH MANOR CONVALESCENT HOSPITAL</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3710 WEST TULARE AVE, VISALIA, CA 93277 TULARE COUNTY</b>		
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	<p>The following reflects the findings of the Department of Public Health during a complaint/breach event visit:</p> <p>Complaint Intake Number: CA00195220 - Substantiated</p> <p>Representing the Department of Public Health: [REDACTED], HFEN</p> <p>The inspection was limited to the specific facility event investigated and does not represent the findings of a full inspection of the facility.</p> <p>Health and Safety Code Section 1280.15(a) A clinic, health facility, home health agency, or hospice licensed pursuant to Section 1204, 1250, 1725, or 1745 shall prevent unlawful or unauthorized access to, and use or disclosure of, patients' medical information, as defined in subdivision (g) of Section 56.05 of the Civil Code and consistent with Section 130203. The department, after investigation, may assess an administrative penalty for a violation of this section of up to twenty-five thousand dollars (\$25,000) per patient whose medical information was unlawfully or without authorization accessed, used, or disclosed, and up to seventeen thousand five hundred dollars (\$17,500) per subsequent occurrence of unlawful or unauthorized access, use, or disclosure of that patients' medical information.</p> <p>Based on resident, police and providers interviews, and police and administrative document review, the facility failed to ensure the information contained in</p>			

Event ID:MCEG11

11/19/2010

11:14:17AM

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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(X6) DATE

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	<p><b>Continued From page 3</b></p> <p>Resident 2. The police report included Resident 2 was a victim of identity theft from Kay and Zales Jewelers and Citibank which were sent to PTA's residence. Credit had been obtained in Resident 2's name as well as high speed Internet for PTA's address.</p> <p>On 9/17/09 at 9:35 a.m., during a telephone interview Resident 2 stated, "I have felt a lot of stress, annoyance and anger about the situation." Resident 2 stated she was only in the nursing facility for a short time to recuperate from back surgery. Resident 2 expressed her concern about being subpoenaed for a hearing on October 2nd. Resident 2 stated, "I'm anxious about having to sit in court, my back pain is better but I still have pain".</p> <p>On 9/08/09 the local Police report was reviewed for Resident 3. The report included Resident 3 was a victim of identity theft. Resident 3 received a GE Money Bank offer located at PTA's address.</p> <p>On 9/17/09 at 10:30 a.m., during a telephone interview, the daughter-in-law of Resident 3 stated that the family tried to filter the information that they gave to Resident 3. The daughter-in-law stated Resident 3 has a heart condition but was still able to reside in independent living in his own little apartment. The daughter-in-law stated when his mail stopped coming the family contacted the fraud department of he United States Postal Service. At that time they learned that a change of address form had been submitted to the Post Office to change Resident 3's mail delivery by the perpetrator</p>				

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	<p><b>Continued From page 5</b></p> <p>The failure to ensure the information contained in resident's clinical record was kept confidential when the face sheets for 5 residents were photocopied for the purpose of identity theft. This failure resulted in psychosocial harm to 3 residents (Resident 1,2 and 3) and had the potential for financial harm to Residents 1,2,3,4 and 5. The above facility failures may result in an Administrative Penalty.</p>				

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