

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

POC Accepted 2.11.2025

PRINTED: 12/30/2024  
FORM APPROVED  
OMB NO. 0938-0391

|   |  |  |   |                            |  |
|---|--|--|---|----------------------------|--|
| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                           |  | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>056351</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____  |                            | (X3) DATE SURVEY<br>COMPLETED<br><br><b>C</b><br><b>12/16/2024</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>CHATSWORTH PARK HEALTH CARE CENTER</b> |  |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>10610 OWENSMOUTH</b><br><b>CHATSWORTH, CA 91311</b>   |                            |  |
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| F 000   | INITIAL COMMENTS<br><br>The following reflects the findings of the California Department of Public Health during an abbreviated standard survey.<br><br>Complaint Number: CA00933131.<br><br>The inspection was limited to the specific Complaint investigated and does not represent the findings of a full inspection of the facility.<br><br>One deficiency was issued for the Complaint Number: CA00933131 (Refer to F573).  | F 000  |   | 1/7/25                     |  |
| F 573<br>SS=D   | Right to Access/Purchase Copies of Records CFR(s): 483.10(g)(2)(i)(ii)(3)<br><br>§483.10(g)(2) The resident has the right to access personal and medical records pertaining to him or herself.<br>(i) The facility must provide the resident with access to personal and medical records pertaining to him or herself, upon an oral or written request, in the form and format requested by the individual, if it is readily producible in such form and format (including in an electronic form or format when such records are maintained electronically), or, if not, in a readable hard copy form or such other form and format as agreed to by the facility and the individual, within 24 hours (excluding weekends and holidays); and<br>(ii) The facility must allow the resident to obtain a copy of the records or any portions thereof (including in an electronic form or format when such records are maintained electronically) upon request and 2 working days advance notice to the facility. The facility may impose a reasonable, cost-based fee on the provision of copies, provided that the fee includes only the cost of: | F 573  | <i>How corrective action will be accomplished for those residents found to have been affected by the identified practice.</i><br><i>Immediate Corrective action(s) for resident(s) found to have been affected by the deficient practice:</i><br><br>- All requested documentation was released to the resident POA on (12/26/24).<br><br><i>How the facility will identify other residents having the potential to be affected by the same identified practice and what corrective action will be taken.</i><br><br>- All residents who submit for release of medical records have the potential to be affected by this deficient practice.<br><br>- No other residents were found to be affected by the identified practice.<br><br>- On 1/2/2025 the Administrator provided education to the Medical Records Assistant (MRA), Medical Records Director (MRD) and department heads regarding Information, Release of Medical records within 48 hours. | 1/7/25                     |  |

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

TITLE

(X6) DATE

ADMINISTRATOR

1/7/25

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| F 573   | <p>Continued From page 1</p> <p>(A) Labor for copying the records requested by the individual, whether in paper or electronic form;</p> <p>(B) Supplies for creating the paper copy or electronic media if the individual requests that the electronic copy be provided on portable media; and</p> <p>(C) Postage, when the individual has requested the copy be mailed.</p> <p>§483.10(g)(3) With the exception of information described in paragraphs (g)(2) and (g)(11) of this section, the facility must ensure that information is provided to each resident in a form and manner the resident can access and understand, including in an alternative format or in a language that the resident can understand. Summaries that translate information described in paragraph (g)(2) of this section may be made available to the patient at their request and expense in accordance with applicable law.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to provide one of three sampled residents (Resident 1) copies of Resident 1's clinical records to Resident 1's representative upon written request.</p> <p>This deficient practice violated the rights of Resident 1's representative to obtain copies of Resident 1's clinical records when requested.</p> <p>Findings:</p> <p>During a review of Resident 1's Admission Record indicated the facility admitted the resident on 9/14/2023 with diagnoses that included Parkinson's disease (a progressive disease of the nervous system marked by tremor [shaking or</p> | F 573  | <p><i>What measures will be put into place or what systemic changes will the facility make to ensure that the identified practice does not recur.</i></p> <ul style="list-style-type: none"> <li>- MRD and MRA will review and audit all resident requests for release of medical records Monday – Friday.</li> </ul> <p><i>How the facility plans to monitor its performance to make sure that solutions are sustained. The plan must be implemented, and the corrective action evaluated for its effectiveness. The POC is integrated into the quality assurance system.</i></p> <ul style="list-style-type: none"> <li>- MRD and MRA will review and audit all resident requests for release of medical records Monday – Friday and present any findings in the Monthly QA meeting for 3 months.</li> </ul> <p><i>Completion date of corrective actions</i></p> <ul style="list-style-type: none"> <li>- Completion date of corrective action 1/7/2025.</li> </ul> |  |  |

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| F 573   | <p>Continued From page 2</p> <p>trembling movements], muscular rigidity, and slow, imprecise movements) and bipolar disorder (a mental illness that causes unusual shifts in mood).</p> <p>During a review of Resident 1's Minimum Data Set (MDS - a resident assessment tool) dated 12/2/2024, indicated the resident's cognitive (the mental action or process of acquiring knowledge and understanding through thought, experience, and the senses) skills for daily decision making was moderately impaired. The MDS further indicated that the resident needed setup or clean-up assistance with eating, oral hygiene, bed mobility (movement), and transfer, and needed supervision or touching assistance with upper/lower body dressing, personal hygiene, and walk.</p> <p>During a review of Resident 1's Authorization for Release of Information (AFROI) dated 11/22/2024, indicated, that Resident 1 authorized that the facility to disclose the requested clinical records to Resident Representative (RR - an individual chosen by the resident to act on his or her behalf in order to support the resident with decision making) 1.</p> <p>During a phone interview on 12/16/2024 at 10:45 a.m., with RR 1, RR 1 stated that Resident 1 filled out the AFROI facility and requested the copies of his (Resident 1's) clinical records about a month ago but did not receive any documents until 12/16/2024. RR 1 further stated that she (RR 1) had conversations with the Director of Nursing (DON) and the Medial Records Director (MRD) several times, but the facility did not provide the requested information written on the AFROI that included the medication administration records (a</p> | F 573  |  |  |  |

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| F 573   | <p>Continued From page 3</p> <p>report detailing the drugs administered to a resident by a healthcare professional at a facility) and blood pressure (the pressure of blood on the walls of your arteries [a blood vessel] as your heart pumps blood around your body) readings.</p> <p>During a concurrent interview and record review on 12/16/2024 at 2:52 p.m., with the MRD, the MRD reviewed Resident 1's AFROI dated and signed on 11/22/2024. The MRD stated that the MRD was on vacation when the request was submitted. The MRD stated that he (MRD) contacted RR 1 on 11/27/2024 and provided RR 1 clarification regarding Vitamin B6 (also known as pyridoxine - vitamin that's essential for the body to function and stay healthy). The MRD further stated, him (MRD) and the DON were on the phone with RR 1 the following day and provided clarification again regarding Vitamin B6. The MRD stated RR 1 verbalized understanding and thanked the MRD, so the MRD thought that RR 1 did not need any other information on the form of AFROI and did not pay attention on the other requested information written in the AFROI form. The MRD stated that the facility did not release any copies of Resident 1's clinical record including information requested as indicated in the AFROI dated 11/22/2024 until 12/16/2024.</p> <p>During a concurrent interview and record review on 12/16/2024 at 5:07 p.m., with the Administrator (ADM), the ADM reviewed the facility's policy and procedure (P&amp;P) regarding the release of a resident's clinical information and stated that the facility should have provided Resident 1 or RR 1 the requested copies of Resident 1's clinical record as indicated in the AFROI form within 48 hours after receiving the written notice/request, but the facility did not provide the requested</p> | F 573  |  |  |  |

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| F 573   | Continued From page 4<br>copies of Resident 1's clinical records to RR 1<br>until 12/16/2024.<br><br>During a review of the facility's P&P, titled<br>"Resident Rights, Subject: Information, Release<br>of" last reviewed on 1/11/2024, indicated, "It is the<br>policy of this facility that the facility maintains the<br>confidentiality of each resident's personal and<br>clinical records .... The resident may initiate a<br>request to release such information contained in<br>his/her records and charts to anyone he/she<br>wishes. Such requests will be honored only upon<br>the receipt of a written, signed, and dated request<br>from the resident or representative (sponsor) ....<br>A resident may obtain photocopies of his or her<br>records by providing the facility with a forty-eight<br>(48) hour (excluding weekends and holidays)<br>advance notice of such request." | F 573  |  |  |  |