

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055099	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/23/2026
NAME OF PROVIDER OR SUPPLIER Creekside Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 1900 Church Lane San Pablo, CA 94806	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0573</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Let each resident or the resident's legal representative access or purchase copies of all the resident's records.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, for one of four sampled residents (Resident 1), the facility failed to provide Resident 1's Responsible Party (RP) copies of requested medical records within the required timeframe when she requested Resident 1's medical records by mail on [DATE] and sent the same request with documents via fax on [DATE]. The requested medical records were not released until [DATE] after the RP got a lawyer to make the same request on her behalf. This failure resulted in a delay in obtaining Resident 1's medical records, causing RP undue concern pertaining to obtaining the requested medical records. Findings: During a record review of Resident 1's admission Record (AR), undated, the AR indicated Resident 1 was admitted to the facility on [DATE] and discharged on [DATE], with discharge reason: Expired. During a phone interview on [DATE] at 11:15 a.m. with the RP, RP stated there was no response from the facility regarding Resident 1's medical records request sent in [DATE]. RP stated she sent an email to the facility's social worker, made multiple calls, sent a mail to the facility, but there was no response from the facility. RP stated she then sent the request and documents to the facility via fax in [DATE]. During a phone interview on [DATE] at 3:56 p.m. with the RP, RP stated when she filed a medical records request initially in [DATE], she emailed the facility's social worker but never got a response from her. RP stated she sent a certified mail to the facility requesting Resident 1's medical records and the tracking information indicated it was delivered. RP stated she never got a response from the facility. RP stated she called again on [DATE] and sent the request with attached documents through fax addressed to Medical Records and she received fax confirmation that it went through, but the facility still did not respond. RP stated she then got in touch with a lawyer who contacted the facility in [DATE] and the records were then released. During a review of a copy of the six pages document titled, Fax Confirmation Report dated [DATE], the documents that were faxed to the facility indicated a medical records request for Resident 1 from the RP addressed to the name of the Medical Records person, the facility's Medical Record Department and the facility's address. The fax included a cover letter that indicated follow up on medical records for Resident 1, and indicated original certified request was mailed on [DATE] and delivered on [DATE] and indicated facility to confirm receipt. The fax document also indicated the request with attached supporting documents - a copy of completed form for Authorization for Release of Information dated [DATE], copy of Resident 1's death certificate, and a copy of RP's government issued ID. During an interview on [DATE] at 2:57 p.m. with Medical Records Director (MRD), MRD stated that when the facility receives a medical records request, the request is submitted to [NAME] (Electronic Risk Management Assistant), which is the facility's record request site. MRD stated when she checked the site, there was a request for Resident 1's records that was released in [DATE]. During a follow up interview on [DATE] at 3:30 p.m. with the MRD, MRD stated she was not aware there was a request by RP in [DATE] and [DATE]. MRD stated the only request found for Resident 1 that had RP's signature, was the one in</p> <p>(continued on next page)</p>		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: 055099	Facility ID: 055099 If continuation sheet Page 1 of 2

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<p>F 0573</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>[DATE] and requested by a law firm, and the records were released. MRD also stated the Administrator (ADM) stated she was not aware of the request made by the RP in [DATE] and [DATE]. When asked how they missed the fax request sent in [DATE] by the RP that had a fax confirmation report completed, MRD stated they receive a lot of faxes on the two fax machines at the facility and it could have been mixed with other faxed documents. During a concurrent interview and record review on [DATE] at 9:41 a.m. with the SSD, SSD read the content of the email dated [DATE], that stated that the RP was trying to request Resident 1's medical records and had called multiple times but had not been able to connect with the staff who handles the records. Further, the email indicated that the RP had asked if the SSD could assist her in getting the request started and wanted to know what documents to submit and where to send them. When asked, SSD stated the date on the email from the RP was [DATE]. SSD stated she must have overlooked the RP's email. SSD stated, It seems this one slipped by. During an interview on [DATE] at 10:54 a.m. with MRD, MRD acknowledged that in this case of the RP's medical records request for Resident 1, the RP did not get the requested medical records in a timely manner. During a follow-up interview on [DATE] at 12:08 p.m. with the MRD, MRD confirmed the medical records request should be released within 24 hours per the facility's policy. MRD acknowledged the RP did not get the medical records as requested on [DATE] via certified mail and via a fax follow up on [DATE]. MRD stated RP's request for medical records [of Resident 1] were released on [DATE] after the law firm requested the records from the facility. During a review of the facility's policy and procedure (P&P) titled, Resident Access to Protected Health Information, undated, the P&P indicated, .Medicare regulations for nursing facilities provide that current residents or their legal representatives may access the resident's designated record set upon written or oral request within 24 hours (excluding holidays and weekends). After receipt of the records for inspection, residents may purchase copies of the records, or any portion of them, at a cost not to exceed the community standard, upon 2 working days' notice. The company will provide the resident with access in the form or format requested. If . not accessible in the format requested, a readable hard copy or a format to which the Company and the resident agree is acceptable.</p>		