

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055104	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/15/2026
NAME OF PROVIDER OR SUPPLIER Sunset Manor Conv Hosp		STREET ADDRESS, CITY, STATE, ZIP CODE 2720 Nevada Avenue El Monte, CA 91733	
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)		
F 0620 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Not require residents to give up Medicare or Medicaid benefits, or pay privately as a condition of admission; and must tell residents what care they do not provide. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to evaluate and determine the level of care needed for one of three residents (Resident 1) as indicated in the facility policy and procedure titled, Transfer and Discharge (including AMA). This deficient practice resulted in Resident 1 arriving at the facility and being sent back to General Acute Care Hospital (GACH) Emergency Department (ER). A review of the facility's admission Record (AR), the AR indicated Resident 1 was admitted to the facility on [DATE] with diagnoses including type 2 diabetes (DM-a chronic condition where blood sugar levels are too high) with diabetic chronic kidney disease (occurs when high blood sugar harms the tiny blood filters in the kidneys), and dependence of renal dialysis (HD-use of external machine and dialyzer [filter] to clean blood through an access point in an arm or leg).A review of Resident 1's History and Physical (H&P), dated 7/14/2026 indicated Resident 1 had the capacity to understand and make decisions.During an interview on 07/14/2026 at 2:15 p.m. with admission Coordinator/Marketer/Licensed Vocational Nurse (ACM-LVN), the ACM stated ACM gave case manager (CM) at GACH a bed (assigning or admitting a patient/resident to a specific physical bed) for Resident 1, report (a verbal and written clinical handover where hospital medical staff share patient details, medical history, and care plans with the receiving facility staff) was taken by the facility Registered Nurse (RN), Resident 1 arrived to the facility, and per ACM's instructions returned Resident 1 back to GACH ER. ACM stated the reason was that the facility did not have authorization for Resident 1's HD transportation scheduled for the 7/14/2026 (Tuesday), Thursday, and Saturday. ACM stated Resident 1 could have had a change in condition during transportation back to GACH and could have been harmed.During an interview on 7/15/2026 at 2:00 p.m. with RN 1, RN 1 stated GACH was notified Resident 1 was assigned a bed and the evening RN took report, so the resident arrived to the facility in an ambulance and sent back to GACH. RN 1 stated the facility policy for newly admitted residents was to call the admitting doctor for residents (in general) and receive orders as to what the doctor would like the facility to do (for care, treatment, and/or services). RN 1 stated, in this case the policy for admission and transfer was not followed. RN1 stated Resident 1 was sent back to GACH which placed Resident 1 in danger of a health decline during transportation.During an interview on 7/15/2026 at 3:00 p.m. with Social Service Director (SSD), the SSD stated Resident 1 could have been admitted , and in the morning, SSD would have called the insurance to obtain transportation benefits, or the other option which was to ask for authorization from our Administrator to pay out of pocket since Resident 1 was already admitted to the facility.During a review of the facility's P&P titled, admission of a Resident, revised on 3/10/2025 indicated Residents are admitted to the facility under orders of the attending physician.During a review of the facility's P&P titled, Transfer and Discharge (including AMA), dated 12/19/2022, indicated, It is policy of this facility to permit each (continued on next page)		

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:	Facility ID: 055104 If continuation sheet Page 1 of 2

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F 0620 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	resident to remain in the facility, and not transfer or discharge the resident from the facility, except in limited circumstances. This policy applies to all residents regardless of their payment source. Policy Explanation and Compliance Guidelines: The facility will evaluate and determine the level of care needed for the resident prior to admission to ensure the facility's ability to meet the resident's needs. During a review of the facility's P&P titled, Transportation, revised on 1/22/2024, indicated the facility shall help arrange transportation for residents as needed. The P&P indicated, social services will help the resident as needed to obtain transportation. The P&P indicated, the facility will assist in arranging transportation to or from the facility when the resident's health insurance does not cover the cost. The P&P indicated, inquires concerning transportation should be referred to social services.		