

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055293	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/07/2026
NAME OF PROVIDER OR SUPPLIER  Santa Anita Convalescent Hospital		STREET ADDRESS, CITY, STATE, ZIP CODE  5522 Gracewood Ave. Temple City, CA 91780	

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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on interview and record review, the facility failed to maintain accurate medical records for one (1) of two (2) sampled Residents (Resident 1), when Resident 1's arbitration agreement (a legally binding contract where parties agree to resolve disputes through a private arbitrator rather than a public court trial) indicated an electronic signature from Resident 1 on 2/10/2026 and from Resident 1's responsible party (RP 1) on 3/7/2026, when neither signed the arbitration agreement. This failure resulted in an inaccurate arbitration agreement for Resident 1, which could potentially lead staff to follow an agreement that RP 1 did not approve/consent to. Findings: During a review of Resident 1's admission Record, the admission Record indicated Resident 1 was originally admitted to the facility on [DATE] with diagnoses that included Alzheimer's disease (a disease characterized by a progressive decline in mental abilities), Parkinson's disease (a progressive disease of the nervous system marked by tremor, muscular rigidity, and slow, imprecise movements), and gastro-esophageal reflux disease (GERD- chronic digestive disease where the contents of the stomach refluxes and irritates the esophagus). The admission Record also indicated Responsible Party 1 (RP 1) as Resident 1's power of attorney (a legally designated person to make medical decisions on a resident's behalf). During a review of Resident 1's History &amp; Physical (H&amp;P), dated 2/9/2026, the H&amp;P indicated Resident 1 did not have the capacity to understand and make decisions. During a concurrent interview and record review on 4/6/2026 at 3:32 PM with the admission Coordinator (AC), Resident 1's Arbitration Agreement, dated 2/10/2026 and Audit Log, for arbitration agreement, (undated) were reviewed. Resident 1's Arbitration Agreement indicated Resident 1's electronic signature was completed 2/10/2026. Resident 1's Audit Log indicated Resident 1 signed the arbitration agreement by electronic consent on 2/10/2026, and RP 1 signed the arbitration agreement by electronic consent on 3/7/2026. The AC stated Resident 1's arbitration agreement with electronic signatures from Resident 1 and RP 1 was not accurate. The AC stated the facility has an electronic admission record system wherein the facility sent Resident 1's admission documents (including the arbitration agreement) by email to RP 1 for signature. The AC explained that when the admission packet is opened electronically, the system automatically records an electronic signature for Resident 1, even if Resident 1 did not sign it. The AC further explained that the system is designed to mark a document as signed once the packet is accessed, rather than requiring an actual signature from the resident or RP. As a result, the system can show an arbitration agreement as signed by the resident and/or RP when they did not sign it, which makes the agreement inaccurate. During an interview on 4/7/2026 at 9:56 AM with the Assistant Administrator, the Assistant Administrator stated the facility used a third party (a company, vendor or individual outside of the organization [facility]) system to complete signatures for the facility's electronic admission packet (including the arbitration agreements) and because of this, the system may not reflect all signatures accurately. During an interview on 4/7/2026 at 3:36 PM with RP 1, RP 1 stated the facility sent her an electronic arbitration agreement, but she did not sign it and did not intend to sign any arbitration agreement for Resident 1. RP 1 also said she is Resident 1's POA, and Resident 1 does not sign any legal documents. During an interview (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
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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>on 4/7/2026 at 4:40 PM with the Administrator, the Administrator stated it was important to ensure that the medical records and agreements of residents are accurate for the benefit of the residents to ensure quality care is addressed and to ensure that responsible parties and POAs are aware and in agreement. During a review of the facility's policy &amp; procedure (P&amp;P) titled, Medical Record Content, revised 5/1/2019, the P&amp;P indicated the medical record will be accurate, timely, and complete. During a review of the facility's P&amp;P titled, admission and Orientation of Residents, revised 9/1/2023, the P&amp;P indicated if the resident/resident representative agrees to the terms contained in the California Standard admission Agreement (SAA), the resident/resident representative will sign and date the SAA (including arbitration agreements).</p>		