

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  055601	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/23/2024
NAME OF PROVIDER OR SUPPLIER  Parkview Julian Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1801 Julian Avenue Bakersfield, CA 93304	

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 - Some</p>	<p>Let each resident or the resident's legal representative access or purchase copies of all the resident's records.</p> <p>39763</p> <p>Based on interview and record review, the facility failed to:</p> <ol style="list-style-type: none"> <li>Follow their policy and procedure (P&amp;P) titled, Resident Access to PHI (protected health information), when three of four sampled residents (Resident 1, Resident 2, and Resident 3) medical records request (MRR) were not logged. This failure had the potential for MRR not to be reviewed and acted upon timely for Resident 1, Resident 2, and Resident 3.</li> <li>Follow their P&amp;P titled Third Party Disclosures of Protected Health Information, when communication for request were not acted upon timely for three of four sampled residents (Resident 1, Resident 2, and Resident 3). This failure resulted in a violation of Resident 1, Resident 2, and Resident 3's rights for MMR to be acted upon timely for Resident 1, Resident 2, and Resident 3.</li> </ol> <p>Findings:</p> <ol style="list-style-type: none"> <li>During a concurrent interview and record review on 12/23/24 at 3:04 p.m. with Medical Records (MR), MR stated she received an MMR for Resident 1, Resident 2, and Resident 3. MR stated she does not keep a log to track the MRR.</li> </ol> <p>During a review of the facility's P&amp;P titled, Resident Access to PHI, revised November 1, 2017, the P&amp;P indicated, III. Documentation A. The Facility will document the following information on . Log of Request for Access to PHI and retain such information for a period of ten years: i. The date of the resident or resident's personal representative's request for access to PHI; ii. The name and the title of the Facility employee addressing the request; iii. The date of the Facility's response; iv. The action taken by the facility in response to the request; and v. Whether the resident asked for a review of the facility's initial response.</p> <ol style="list-style-type: none"> <li>During a concurrent interview and record review, on 12/23/24 at 3:04 p.m. with MR, Resident 1's MRR dated 11/21/24, Resident 2's MRR, dated 11/25/24, and Resident 3's MRR dated 12/3/24 were reviewed. MR confirmed Resident 1 (31 days), Resident 2 (27 days) and Resident 3's (20 days) MRR have not been sent to the requesting office.</li> </ol> <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:  Facility ID: 055601	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 - Some</p>	<p>During a review of the facility's P&amp;P titled, Third Party Disclosures of Protected Health Information, revised 11/1/17, the P&amp;P indicated, VII. Release of PHI to an Attorney Prior to Filing to a Lawsuit A. A resident's attorney may request PHI of a resident prior to filing a lawsuit. B. If the request is made before the lawsuit is filed, the facility will determine the validity of the request according to the procedure described in (Section LL), and will comply with the request within five (5) days.</p>