STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	055710	A. Building B. Wing	06/02/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
West Hollywood Healthcare & Wellness Centre, LP	855 North Fairfax Avenue Los Angeles, CA 90046

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 0627 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to ensure that one of four sampled residents (Resident 1) was permitted to remain in the facility pending the results of an appeal of a discharge. Resident 1 submitted an appeal for the discharge on [DATE]; however, the facility discharged Resident 1 on the same day, prior to receiving the appeal decision. On 5/23/26, Resident 1's appeal to remain in the facility was approved, but Resident 1 had already been transferred from the facility.This deficient practice resulted in Resident 1 being discharged without due process, which could negatively impact Resident 1's continuity of care and treatment.During a review of Resident 1's Face Sheet (FS) dated 6/2/2026, the FS indicated Resident 1 originally admitted on [DATE] and re-admitted on [DATE], with the diagnoses that included but not limit to: paraplegia (a condition a person cannot move or feel their legs because of an injury or damage to the lower part of the spinal cord), muscle weakness, depressive disorder (a condition where a person feels very sad, empty, or hopeless for a long time.), and urinary tract infection (an infection when germs, usually bacteria, get into the urinary system and cause irritation or discomfort).During a review of Resident 1's Minimum Date Set (MDS, a resident assessment tool) dated 4/23/2026, the MDS indicated Resident 1 is cognitive intact (a person's thinking and understanding are normal).During a review of Resident 1's Discharge summary dated [DATE], the Discharge Summary indicated Resident 1 was discharged on 5/21/2026.During a review of Resident 1's Census List dated 6/2/2026, the Census List indicated Resident discharged on 5/21/2026 at 11:05 am.During an interview on 6/2/2026 at 11:53 am with Resident 1, Resident 1 stated he filed an appeal on 5/21/2026, but he was discharged the same day.During a concurrent interview and record review on 6/2/2026 at 1:45 pm with admission Coordinator (ADC), Resident 1's Immediate Notification Medicare Beneficiary Appeal Request (INMBAP, a request for facility to respond with supporting medical record regarding with resident's appeal) dated 5/21/2026 and Resident 1's Beneficiary and Family Centered Care - Quality Improvement Organization Determination letter (BFCC-QIO DL, a letter that tells a nursing home resident the result of their appeal after they disagree with being discharged .) dated 5/23/2026 were reviewed. The INMBAP indicated on 5/21/2026 at 9:56 am, facility received Resident 1's appeal request of facility decision of terminate service. ADC stated she was not aware of this appeal. The BFCC-QIO DL indicated Resident 1 won the appeal and facility was notified on 5/23/2026 at 8:09 am. ADC stated no follow up was done because resident was already discharged .During an interview on 6/2/2026 at 1:45 pm with Social Service Director (SSD), SSD stated they were unaware Resident 1 had filed an appeal on the day of discharge, however, the time of appeal was submitted at 9:56 am, and Resident left the facility at 11:05 am, Resident 1 had an on-going appeal before his discharge and he was discharged .During an interview on 6/2/2026 at 2:07 pm with the Director of Nursing (DON), DON stated Resident 1 should not have been discharged on 5/21/2026. Any resident has an active appeal, the facility must hold the discharge and keep the resident until the appeal decision is received; failing to do so, resulting in Resident 1 being improperly discharged and negatively affected his care and treatment.During a review of the facility's policy and procedures (P&P) titled, Transfer and Discharge dated 1/26/2026, (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0627 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	the P&P indicated facility follows Centers for Medicare & Medicaid Services (CMS, the government group that sets the rules for hospitals, nursing homes, and other healthcare places to make sure patients are treated safely and correctly) regulations for discharge and appeal.