

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555103	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/28/2026
NAME OF PROVIDER OR SUPPLIER French Park Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 600 E Washington Avenue Santa Ana, CA 92701	
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 - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and medical record review, the facility failed to ensure the medical record was accurate for one of six sampled residents (Resident 1). * Resident 1's social services notes were not accurate related to the hours the resident went on a temporary out on pass from the facility. This failure had the potential to negatively impact the delivery of services as the medical information was not accurate. Findings: Medical record review for Resident 1 was initiated on 1/28/26. Resident 1 was admitted to the facility on [DATE]. Review of Resident 1's H&P examination dated 12/12/25, showed the resident could make needs known and make medical decisions. Review of Resident 1's Order Summary Report showed a physician's order dated 7/5/25, for the resident to may go out on pass for therapeutic purposes. Review of Resident 1's MDS assessment dated [DATE], showed Resident 1's had a BIMS score of 15, indicating resident was cognitively intact. Review of Resident 1's Release for Temporary Absence form (undated) showed the resident signed out for temporary absence from the facility on the following days:- on 11/3/25, the resident left the facility at 1400 to 1810 hours;- on 11/4/25, the resident left the facility at 1400 to 1750 hours;- on 11/5/25, the resident left the facility at 1415 to 1755 hours;- on 11/7/25, the resident left the facility at 1330 to 1830 hours;- on 11/8/25, the resident left the facility at 1330 to 1800 hours;- on 11/9/25, the resident left the facility at 1300 to 1710 hours;- on 11/10/25, the resident left the facility at 1315 hours, however, the return time was illegible;- on 11/11/25, the resident left the facility at 1345 hours, however, the return time was not documented;- on 11/12/25, the resident left the facility at 1400 hours, however the return time was not documented;- on 11/13/25, left facility at 1345 hours to 1810 hours;- on 11/14/25, the resident left the facility at 1300 hours to 1750 hours;- on 11/15/25, the resident left the facility at 1330 to 1740 hours;- on 11/16/25, the resident left the facility at 1300 hours to 1755 hours;- on 11/17/25, the resident left the facility at 1330 hours to 1800 hours;- on 11/18/25, the resident left the facility at 1330 hours, however, the return time was not documented;- on 11/19/25, the resident left the facility at 1400 hours, however, the return time was not documented;- on 11/20/25, the resident left the facility at 1330 hours to 1755 hours;- on 11/21/25, the resident left the facility at 1300 hours to 1810 hours;- on 11/22/25, the resident left the facility at 1300 hours to 1800 hours;- on 11/23/25, the resident left the facility at 1330 hours to 1805 hours;- on 11/24/25, the resident left the facility at 1330 hours to 1750 hours;- on 11/25/25, the resident left the facility at 1345 hours, however, the return time was not documented;- on 11/26/25, the resident left the facility at 1330 hours, however, the return time was not documented;- on 11/27/25, the resident left the facility at 1400 hours to 1810 hours;- on 11/28/25, the resident left the facility at 1400 hours to 1750 hours;- on 11/29/25, the resident left the facility at 1410 hours to 1745 hours;- on 11/30/25, the resident left the facility at 1410 hours, however, the return time was not documented;- on 12/1/25, the resident left the facility at 1400 hours to 1800 hours;-</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:	Facility ID: 555103
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<p>F 0842</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>on 12/2/25, the resident left the facility at 1400 hours, however, the return time was not documented;- on 12/3/25, the resident left the facility at 1400 hours, however, the return time was not documented;- on 12/4/25, the resident left the facility at 1400 hours to 1650 hours;- on 12/5/25, the resident left the facility at 1430 hours to 1820 hours;- on 12/6/25, the resident left the facility at 1400 hours to 1825 hours; and- on 12/8/25, the resident left the facility at 1347 hours, however, the return time was not documented. Review of Resident 1's Social Services Progress Note dated 12/9/25, showed in part, the resident was able to go out on pass every day for more than six hours a day. On 1/28/26 at 1041 hours, an interview and concurrent medical record review for Resident 1 was conducted with LVN 4. LVN 4 stated Resident 1 signed out and back to the receptionist whenever the resident went out on pass. On 1/28/26 at 1048 hours, an interview was conducted with Resident 1. Resident 1 stated the facility gave her a copy of her medical records. Resident 1 verified she was able to go out on pass every day for more than six hours a day. On 1/28/26 at 1147 hours, an interview and concurrent medical record review was conducted with the Receptionist. The Receptionist stated Resident 1 signed herself out and back upon return to the facility. The Receptionist verified Resident 1's Release for Temporary Absence form showed some of the resident return times were not documented in the form. On 1/28/26 at 1500 hours, an interview and concurrent medical record review was conducted with the SSD. The SSD stated the receptionist left the facility at 1900 hours. The SSD verified some of the dates in Resident 1's Temporary Absence form did not show the resident's return time. The SSD stated when Resident 1 returned to the facility after 1900 hours, there was no facility staff in the reception to sign her back in. The SSD verified the resident was able to go out on pass every day for more than six hours a day. On 1/28/26 at 1515 hours, an interview and concurrent medical record review was conducted with the SSA. The SSA verified Resident 1's Temporary Absence form failed to show some of the resident's return time to the facility. On 1/28/26 at 1610 hours, an interview and concurrent medical record review was conducted with the ADON. The ADON stated Resident 1 went out on pass and returned to the facility usually at around 1800 hours. The ADON stated Resident 1 signed out and back with the receptionist. The ADON verified Resident 1's Release for Temporary Absence form showed some of the resident's return times were not documented in the form. The ADON stated Resident 1 must have returned to the facility after the receptionist had left the facility. The ADON stated Resident 1 should be signing back in the nursing station upon return when receptionist was no longer in the facility. On 12/28/26 at 1650 hours, an interview was conducted with the Administrator and the ADON. The Administrator and ADON were informed and acknowledged the above findings.</p>		