STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555319	A. Building B. Wing	10/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Sunrise Post Acute	3476 W. Wilson St. Banning, CA 92220

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 0583 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Keep residents' personal and medical records private and confidential. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 44505 Based on observation, interview, and record review, the facility failed to ensure residents' mail was protected for privacy and confidentiality for one of three sampled residents (Resident 1), when the mailbox was not locked. This deficient practice had the potential for confidential information's, personnel letters, sensitive documents to be accessed by unauthorized individual. Findings: On October 7, 2024, at 10:00 a.m., an unannounced visit was conducted at the facility to investigate a complaint regarding resident rights. A review of Resident 1's Admission Record indicated Resident 1 was admitted to the facility on [DATE], with diagnoses that included orthopedic (dealing with bones or muscles) aftercare and wasting and atrophy (decrease in size of an organ or tissue). On October 7, 2024, at 10:40 a.m., during a concurrent observation and interview, the Director of Staff Development (DSD) stated that there were two mailboxes located outside the gate. The DSD stated both mailboxes were noted to be easily accessible and without locks. On October 7, 2024, at 11:38 a.m., during an interview, the Activity Director (AD), stated she or her assistants picked up the incoming mail from the black mailbox outside and that the mailboxes had never been locked. On October 7, 2024, at 2:05 p.m., during an interview, the Director of Nursing (DON) stated there was a potential risk of residents' mail and personal information being exposed and stolen due to the mailbox being unsecured. A review of the facility's policy and procedure titled, Confidentiality of Information and Personal Privacy dated 2001, indicated, .our facility will protect and safeguard resident confidentiality and personal privacy . access to resident personal and medical records will be limited to authorized staff and business associates .

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