

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555566	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/06/2025
NAME OF PROVIDER OR SUPPLIER Corona Post Acute Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2600 South Main Street Corona, CA 92882	

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 - Few</p>	<p>Let each resident or the resident's legal representative access or purchase copies of all the resident's records.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to provide timely access to medical records for one of one sampled resident (Resident A).This failure had the potential to delay Resident A's ability to obtain personal health information needed for continuity of care after discharge. Findings:A review of Resident A's admission Record, indicated Resident A was admitted to the facility on [DATE], with diagnoses which included chronic kidney disease (gradual loss of kidney function over time). Resident A was discharged on November 11, 2023. On August 26, 2025, at 3:20 p.m., a concurrent interview and record review were conducted with the Medical Records Director (MRD). The MRD stated a written request for medical records submitted by Resident A's legal representative was received on August 12, 2025. The MRD stated, Resident A's medical records should have been released within two working days of the request. The MRD further stated, the request had been forwarded to the facility's legal department for review. On October 6, 2025, at 10:05 a.m., an interview was conducted with the MRD. The MRD stated the facility did not respond to the request until September 8, 2025, which was 27 calendar days after the request was made. the MRD stated, the facility did not comply with the regulatory requirement to provide access or copies within 48 hours (two working days).A review of the facility policy and procedure titled, Release of Information, dated November 2009, indicated .All information contained in the resident's medical records .may only be released by the written consent of the resident.A resident may obtain photocopies of his or her records by providing the facility with at least forty-eight (48) hour (excluding weekends and holidays) advance notice of such request.</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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