

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555733	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/28/2025
NAME OF PROVIDER OR SUPPLIER The Pavilion at Sunny Hills		STREET ADDRESS, CITY, STATE, ZIP CODE 2222 N. Harbor Blvd. Fullerton, CA 92835	

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>48853</p> <p>Based on interview, medical record review, and facility P&P review, the facility failed to ensure the medication administration was documented for one of three sampled residents (Resident 1). This failure had the potential for the medical record information to be not accurate for Resident 1.</p> <p>Findings:</p> <p>Review of facility's P&P titled Administering Medications revised March 2023 showed the medications must be administered in accordance with the orders. Medications must be administered in accordance with state and federal guidelines. Following verification of the resident and scheduled medication, the licensed nurse follows the pour, pass, chart standard of practice.</p> <p>Closed medical record review for Resident 1 was initiated on 5/27/25. Resident 1 was admitted in the facility on 4/23/25.</p> <p>Review of Resident 1's Order Summary Report dated 5/28/25, showed the following physician's orders:</p> <ul style="list-style-type: none"> - dated 4/23/25, acetaminophen (pain reliever) 325 mg, give two tablets by mouth every four hours as needed for mild pain (1-3 pain scale) - dated 4/23/25, baclofen (muscle relaxant) 5 mg tablet, give onetablet by mouth every eight hours as needed for muscle spasm. <p>Review of Resident 1's MAR for May 2025 failed to show two tablets of acetaminophen 325 mg and one tablet of baclofen 5 mg were documented as administered on 5/9/25 at approximately 1300 hours.</p> <p>Review of Resident 1's Progress Notes failed to show two tablets of acetaminophen 325 mg and one tablet of baclofen 5 mg medications were documented as administered on 5/9/25 at approximately 1300 hours.</p> <p>On 5/27/25 at 1112 hours, an interview was conducted with Family Member 1. Family Member 1 stated on 5/9/25, Resident 1 was given baclofen medication approximately 1300 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
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<p>F 0842</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p>	<p>On 5/27/25 at 1437 hours, an interview and concurrent closed medical record review was conducted with LVN 1. LVN 1 stated he administered two tablets of acetaminophen 325 mg and one tablet of baclofen 5 mg orally between 1200-1300 hours to Resident 1 for pain and muscle spasm. LVN 1 verified he failed to document the medications as administered in the MAR. LVN 1 stated he should have documented in Resident 1's MAR after the medications were administered to prevent medication errors.</p> <p>On 5/27/25 at 1625 hours, an interview was conducted with RN 1. RN 1 stated LVN 1 verified with him Resident 1 received one tablet of baclofen on 5/9/25, between 1200-1300 hours; however, LVN 1 was not able to document the medication was administered. RN 1 stated the administration of the medications as needed was important to prevent the confusion in the medications received by the resident.</p> <p>On 5/27/25 at 1537 hours, an interview was conducted with the DON. The DON was informed and acknowledged the above findings. The DON stated she expects the licensed nurses to document right after the medications were administered.</p>