

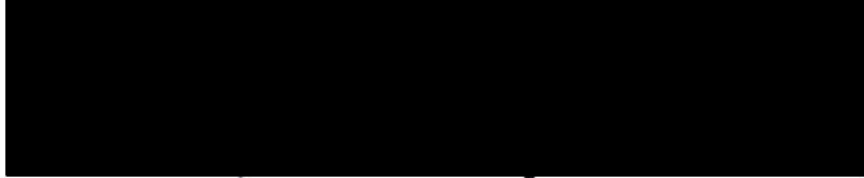
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 555251	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 04/02/2026
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NAME OF PROVIDER OR SUPPLIER Knolls West Post Acute LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 16890 Green Tree Blvd , Victorville, California, 92395
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
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F0000	<p>INITIAL COMMENTS</p> <p>The following reflects the findings of the California Department of Public Health during a complaint investigation.</p> <p>Complaint Number: 2962664</p> <p>The inspection was limited to the specific complaint and does not reflect the findings of a full inspection of the facility.</p> <p>One deficiency was issued as a result of Complaint Number: 2962664.</p>	F0000	<p>F 000 INITIAL COMMENTS</p> <p>Knolls West Post Acute, LLC</p> <p>Submission of this plan of correction is not a legal admission that a deficiency exists or that this statement of deficiency was correctly cited and is also not to be construed as an admission of interest against the facility, the Administrator, or any employees, agents or other individuals who may be discussed in this response and plan of correction. In addition, preparation and submission of this plan of correction does not constitute an admission, an agreement of any kind by the facility of the truth of any facts alleged, or the correctness of any conclusions set forth in this allegation by the surveying agency.</p>	
F0573 SS = D	<p>Right to Access/Purchase Copies of Records</p> <p>CFR(s): 483.10(g)(2)(i)(ii)(3)</p> <p>§483.10(g)(2) The resident has the right to access personal and medical records pertaining to him or herself.</p> <p>(i) The facility must provide the resident with access to personal and medical records pertaining to him or herself, upon an oral or written request, in the form and format requested by the individual, if it is readily producible in such form and format (including in an electronic form or format when such records are maintained electronically), or, if not, in a readable hard copy form or such other form and format as agreed to by the facility and the individual, within 24 hours (excluding weekends and holidays); and</p> <p>(ii) The facility must allow the resident to obtain a copy of the records or any portions thereof (including in an electronic form or format when such records are maintained electronically) upon request and 2 working days advance notice to the facility. The facility may impose a reasonable, cost-based fee on the provision of copies, provided that the fee includes only the cost of:</p> <p>(A) Labor for copying the records requested by the individual, whether in paper or electronic form;</p> <p>(B) Supplies for creating the paper copy or electronic</p>	F0573	<p>F0573 Right to Access/Purchase Copies of Records</p> <p>What corrective action(s) will be accomplished for those Residents found to have been affected by the deficient practice?</p> <p>Medical Records Director (MRD) released medical records for Resident 1 as requested by the legal representative (Legal Staff) on April 21, 2026.</p> <p>How will other individuals with the potential to be affected by this deficient practice be identified and protected?</p> <p>No other Resident was identified to have been effected by the deficient practice.</p> <p>What systemic changes will be implemented to ensure that the deficient practice does not recur?</p> <p>The Quality Assurance Committee met on April 14, 2026 to review the Policy and Procedure which was then forwarded to the Knolls West Post Acute legal team for further evaluation. Revision of the policy will be discussed and approved by the Quality Assurance Committee to ensure the facility meets all Federal and State Regulations.</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 reverse for further 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 of survey. If an approved plan of correction is requisite to continued program

	TITLE <i>Administrator</i>	(X6) DATE 04/03/26
H1 Facility ID: CA240000365		If continuation sheet Page 1 of 3

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F0573 SS = D	<p>Continued from page 1 media if the individual requests that the electronic copy be provided on portable media; and</p> <p>(C)Postage, when the individual has requested the copy be mailed.</p> <p>§483.10(g)(3) With the exception of information described in paragraphs (g)(2) and (g)(11) of this section, the facility must ensure that information is provided to each resident in a form and manner the resident can access and understand, including in an alternative format or in a language that the resident can understand. Summaries that translate information described in paragraph (g)(2) of this section may be made available to the patient at their request and expense in accordance with applicable law.</p> <p>This REQUIREMENT is NOT MET as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure medical records were processed and released according to federal regulations for one of four residents (Resident 1).</p> <p>This failure had the potential to jeopardize Resident 1's authorized representative's access to medical records through lawful authorization requests, potentially adversely impacting legal matters related to the resident.</p> <p>Findings:</p> <p>During a review of Resident 1's clinical record, the face sheet (contains demographic and medical information), indicated Resident 1 was admitted to the facility on November 18, 2025, with diagnoses that includes [REDACTED]</p> <p>During a telephone interview with a staff from Resident 1's legal representative (Legal Staff) on March 30, 2026, at 12:19 PM, she stated as of March 26, 2026, the</p>	F0573	<p>F0573 Right to Access/Purchase Copies of Records (CONT.)</p> <p>The Administrator and the Medical Records Director (MRD) are responsible for informing the requesting party for the demand for payment for the requested medical documentation being provided and until payment is received the facility will hold the chart copies.</p> <p>How corrective action(s) will be monitored to ensure solutions are being achieved and sustained</p> <p>The Resident's Responsible Party will be notified upon receipt of the Medical Records Request and review in the presence of the facility representative. Records will be provided if it does not pertain to any legal matters after payment is received. The Administrator and/or Designee is responsible for reporting to the Quality Assurance Committee on a monthly basis and monitoring to ensure that corrective action is implemented and evaluated for its effectiveness. The same will be reviewed on a quarterly basis to the Quality Assurance Committee meeting x 3 quarters or until 100% compliance is achieved and sustained.</p> <p>Date of Completion</p> <p>April 23, 2026</p>	

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F0573 SS = D	<p>Continued from page 2 law office has not yet received the medical records requested from the facility. Legal Staff further stated the initial request was transmitted via fax on February 26, 2026.</p> <p>During a concurrent interview on record review on April 2, 2026, at 1:21 PM, the Medical Record Director (MRD) reviewed the documentation confirming that third-party services for the Law Offices requested medical records for Resident 1 on February 26, 2026. The MRD stated he submitted the requested documents to the Director of Nursing (DON) for review, over a month ago, but has not yet received them back to proceed with the release of medical records.</p> <p>During a concurrent interview and record review on April 2, 2026, at 1:45 PM, with the Assistant Director of Nursing (ADON), "The State Operations Manual Appendix PP-Guidance to Surveyors for Long Term Care Facilities," concerning resident's right to access personal and medical records, the regulation specifies "... The facility must allow the resident to obtain a copy of the records or any portions thereof (including in an electronic form or format when such records are maintained electronically) upon request and 2 working days advance notice to the facility...." The ADON acknowledged that the regulation was not followed by the facility.</p>	F0573		