

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 555910	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/19/2020
NAME OF PROVIDER OF SUPPLIER TRELLIS CHINO		STREET ADDRESS, CITY, STATE, ZIP 5454 WALNUT AVENUE CHINO, CA 91710	
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 0573 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	Let each resident or the resident's legal representative access or purchase copies of all the resident's records. Based on interview and record review, the facility failed to provide the requested medical records for two of the three sampled residents (Resident A and Resident B) upon request and 2 working days of advance notice to the facility. This failure had the potential to result in the residents' prolonged suffering including physical, emotional, and psychological harm. Findings: An unannounced visit was conducted on December 12, 2019 at 4:30 PM, to investigate a complaint regarding the facility's failure to provide the requested records within the time frame required by the regulation. During an interview with the Medical Records Director (MRD) on December 19, 2019 at 4:48 PM, she stated she is responsible for processing medical record requests. The MRD stated their company's legal team handles the release of the records requested by the law firms. She stated she prepares the records and forwards it to their legal department via email. She stated she is not allowed to release the medical records to the law firms. She confirmed that she received the request from the law firm on behalf of Resident A on November 26, 2019 and on December 16, 2019 for Resident B. The MRD stated she does not get informed when the records are mailed out. During a telephone interview with the complainant on June 23, 2020 at 10:10 AM, the complainant stated the records were received for Resident A on December 23, 2019, and December 5, 2019 for Resident B. A record review of the facility's policy and procedure, Health Information Guidelines, undated, the policy indicated under subtitle Legal Record / Record Service, Definition of a Health Record for Legal Purposes, 1. This record would be released upon request.		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE (X6) DATE	

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.