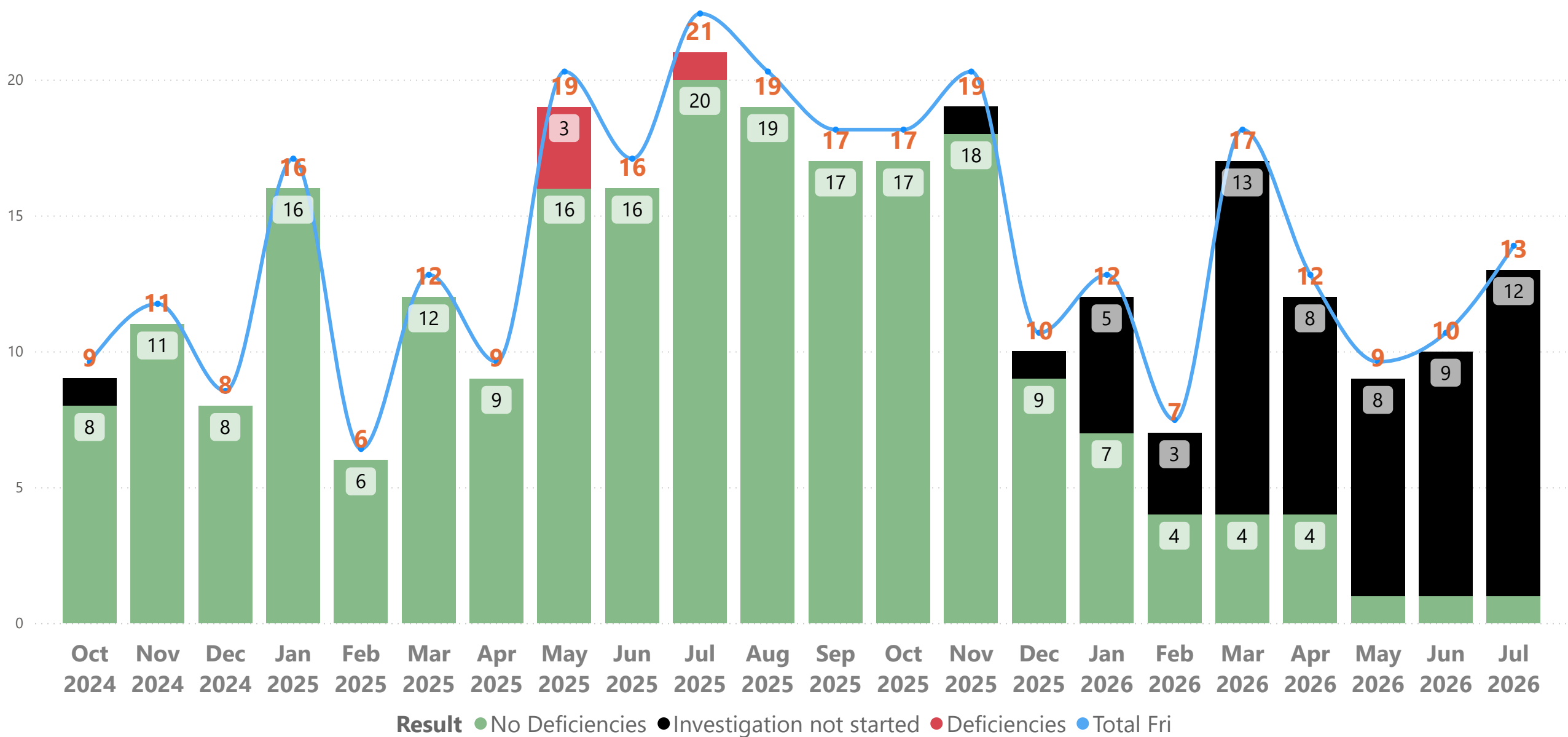




ITEM	DISCUSSION										
FACILITY REPORTED INCIDENTS (FRI)	During July 2026, LHH submitted a total of 13 Facility Reported Incidents (FRIs) to CDPH, and 2 Anonymous Complaints were shared from CDPH. The FRIs include allegations of abuse, privacy breach, and other reportable incidents. <u>July 2026: 15 cases (13 FRIs and 2 Anonymous Complaints)</u> (1 FRI had no deficiency, 12 FRIs cases, investigations have not started by CDPH; 2 Anonymous Complaints had no deficiencies) • 7 Allegations of Abuse ○ Resident to Resident: 5 (5 investigation not started by CDPH) ○ Staff to Resident: 1 (1 no deficiency) ○ Misappropriation of Resident Property: 1 (1 investigation not started by CDPH) • 6 Other Reportable Incidents ○ Major Injury: 4 (4 investigations not started by CDPH) ○ Privacy Breach: 1 (1 investigation not started by CDPH) ○ Construction Project: 1 (1 investigation not started by CDPH) • 2 Anonymous Complaints ○ Anonymous Complaints: 2 (2 Anonymous Complaints, no deficiencies)										
SURVEY UPDATES	1. Annual Certification Survey for SNF Health Inspection from 7/13/26 to 7/17/26 • Nine CDPH surveyors conducted their Annual Certification Survey ○ Included in the certification survey, 17 Facility Reported Incidents and 1 Anonymous Complaint (Administration) ○ Exit conference on 7/17/26 with 13 preliminary findings including: ▪ Medication Error Rate of 3.85% (below 5% threshold) ▪ 17 FRIs: Zero Deficiencies ○ 13 FRIs for November 2025 ○ 3 FRIs for December 2025 ○ 1 FRI for July 2026 ▪ 1 Anonymous Complaint: Zero Deficiency ○ CMS 2567 Statement of Deficiency was received on 7/28/26 ▪ Nine (9) deficiencies with scope and severity of *D and *E.<table><tr><td>1) F805 (SS=E)</td><td>6) F693 (SS=D)</td></tr><tr><td>2) F550 (SS=D)</td><td>7) F756 (SS=D)</td></tr><tr><td>3) F605 (SS=D)</td><td>8) F757 (SS=D)</td></tr><tr><td>4) F640 (SS=D)</td><td>9) F880 (SS=D)</td></tr><tr><td>5) F658 (SS=D)</td><td></td></tr></table>	1) F805 (SS=E)	6) F693 (SS=D)	2) F550 (SS=D)	7) F756 (SS=D)	3) F605 (SS=D)	8) F757 (SS=D)	4) F640 (SS=D)	9) F880 (SS=D)	5) F658 (SS=D)	
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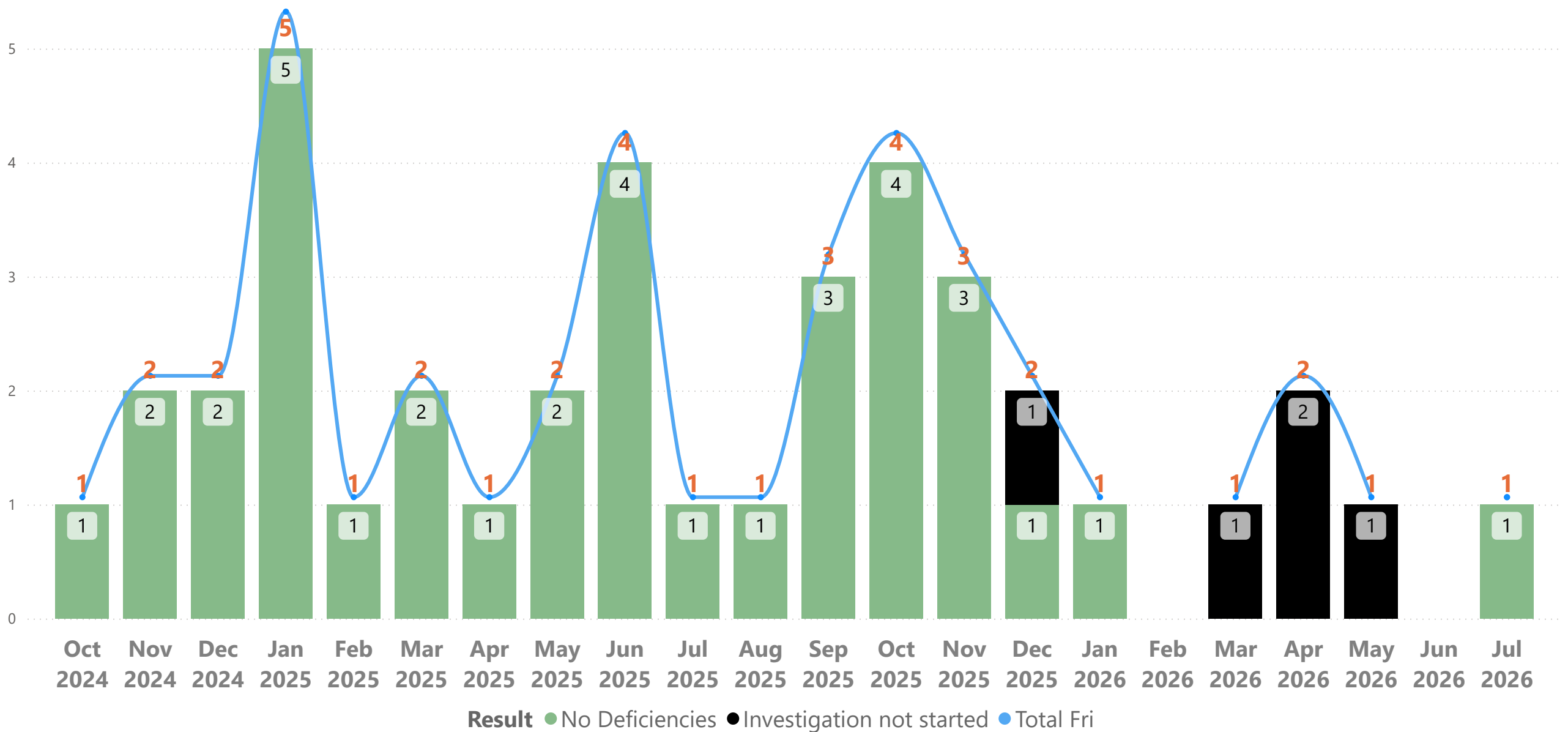
	Legend: *SS = Scope and Severity *D (Isolated) No actual harm with potential for more than minimal harm that is not immediate jeopardy. *E (Pattern) No actual harm with potential for more than minimal harm that is not immediate jeopardy. ○ CMS 2567 Plan of Correction (POC) for SNF was submitted on 8/7/26 to CDPH. 2. Drug Enforcement Administration (DEA) Inspection Follow-visit on 7/13/26 • Security alarm testing around pharmacy area on 7/13/26. No findings. 3. Annual Certification Survey for Life Safety Code from 7/20/26 to 7/22/26 • Two CDPH FLS surveyors conducted their Annual Certification Survey ○ Exit conference on 7/22/26, with 7 preliminary findings ○ CMS 2567 Statement of Deficiency was received on 7/24/26 ▪ Six (6) deficiencies with scope and severity of *D, *E, and *F. <table> <tr> <td>1) K0918 (SS=F)</td> <td>4) K0711 (SS=D)</td> </tr> <tr> <td>2) K0363 (SS=E)</td> <td>5) K0919 (SS=D)</td> </tr> <tr> <td>3) K0353 (SS=D)</td> <td>6) K0920 (SS=D)</td> </tr> </table> ○ CMS 2567 Plan of Correction (POC) for FLS was submitted on 7/31/26 to CDPH. Pending acceptance of POC. 4. Site Visit on 7/23/26 • One CDPH surveyor conducted their investigation for – ○ 2 Facility Reported Incidents and 1 Anonymous Complaint (Quality of Care) ○ Outcomes: ▪ 2 FRIs: Zero Deficiencies ▪ 1 Anonymous Complaint: Zero Deficiency	1) K0918 (SS=F)	4) K0711 (SS=D)	2) K0363 (SS=E)	5) K0919 (SS=D)	3) K0353 (SS=D)	6) K0920 (SS=D)
1) K0918 (SS=F)	4) K0711 (SS=D)						
2) K0363 (SS=E)	5) K0919 (SS=D)						
3) K0353 (SS=D)	6) K0920 (SS=D)						
PLAN OF CORRECTION UPDATES/REPORTING	1. Plan of Correction submitted on 7/31/26 for Annual Certification Survey for Life Safety Code • CMS 2567 Statement of Deficiency received on 7/24/26 • Pending acceptance of plan of correction 2. Plan of Correction submitted on 8/7/26 for Annual Certification Survey for SNF Health Inspection • CMS 2567 Statement of Deficiency received on 7/28/26 • Pending acceptance of plan of correction						
EMAIL/TELEPHONE REQUESTS IN LIEU OF SITE VISITS	None.						
ONGOING/OTHER SITE VISITS	None.						
PENDING INVESTIGATION	61 FRIs pending CDPH investigation. No document request or call/visit.						

Outcome of All Facility Reportable Incidents (October, 2024 – July, 2026)



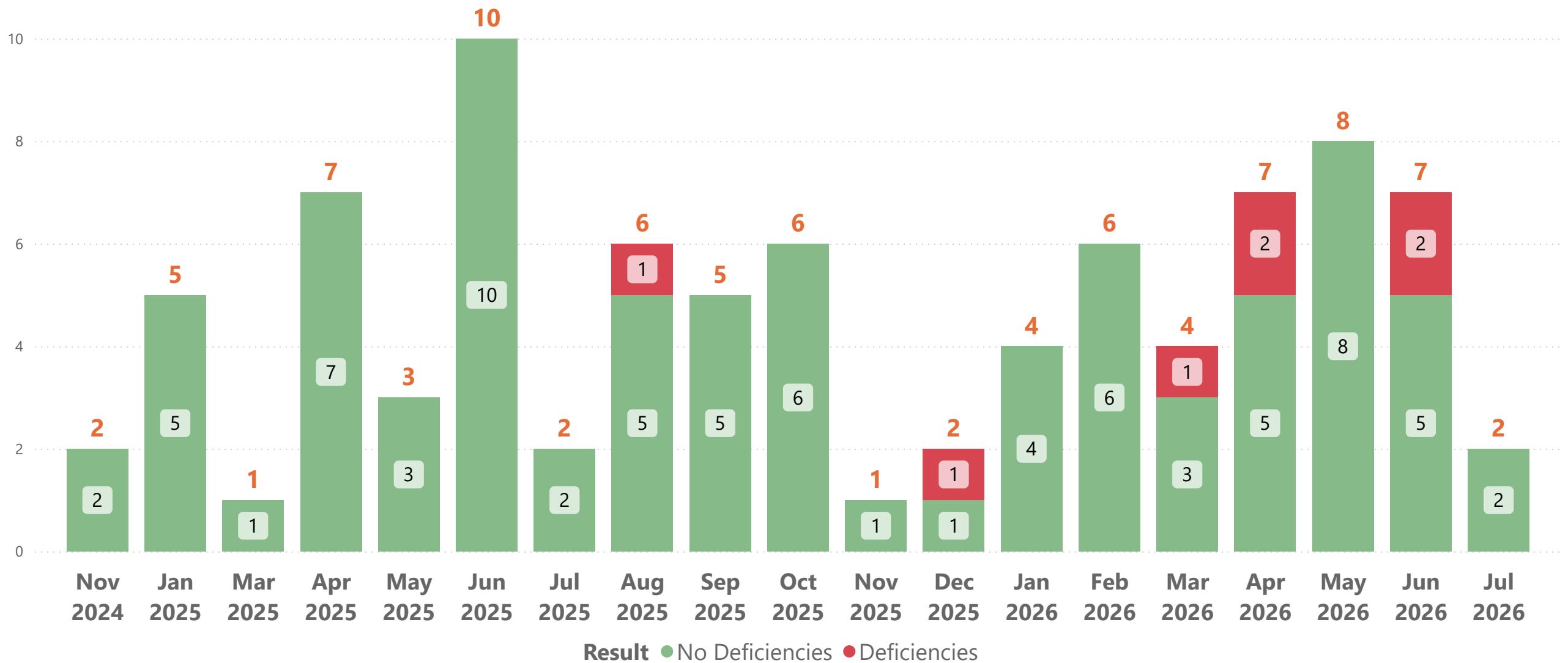
*The start date for these charts correspond to the earliest open case for which a CDPH investigation has not yet started. Cases prior to this point have been closed and are not included in the current reporting.

Outcome of Staff to Resident Complaints (October, 2024 – July, 2026)



*The start date for these charts correspond to the earliest open case for which a CDPH investigation has not yet started. Cases prior to this point have been closed and are not included in the current reporting.

Outcome of Anonymous Complaints (November, 2024 – July, 2026)



*There was a revisit in January 2026 for a December 2025 Complaint;
Not Shown in Jan 26 as it is counted in Dec 25

*The start date for these charts correspond to the earliest open case for which a CDPH investigation has not yet started. Cases prior to this point have been closed and are not included in the current reporting.

All Facility Reportable Incidents: Outcome Summary (October, 2024 – July, 2026)

MonthYear	No Deficiencies	Deficiencies	Pending	Investigation not started	% of "No deficiency" (Closed Cases)
Oct 2024	8			1	100.00%
Nov 2024	11			0	100.00%
Dec 2024	8			0	100.00%
Jan 2025	16			0	100.00%
Feb 2025	6			0	100.00%
Mar 2025	12			0	100.00%
Apr 2025	9			0	100.00%
May 2025	16	3		0	84.21%
Jun 2025	16			0	100.00%
Jul 2025	20	1		0	95.65%
Aug 2025	19			0	100.00%
Sep 2025	17			0	100.00%
Oct 2025	17			0	100.00%
Nov 2025	18			1	100.00%
Dec 2025	9			1	100.00%
Jan 2026	7			5	100.00%
Feb 2026	4			3	100.00%
Mar 2026	4			13	100.00%
Apr 2026	4			8	100.00%
May 2026	1			8	100.00%
Jun 2026	1			9	100.00%
Jul 2026	1			12	100.00%
Total	224	4		61	98.55%

**The start date for these charts correspond to the earliest open case for which a CDPH investigation has not yet started. Cases prior to this point have been closed and are not included in the current reporting.*

Staff to Resident Complaints: Outcome Summary
(October, 2024 – July, 2026)

MonthYear	No Deficiencies	Deficiencies	Pending	Investigation not started	%No deficiency (Closed Cases)
Oct 2024	1			0	100.00%
Nov 2024	2			0	100.00%
Dec 2024	2			0	100.00%
Jan 2025	5			0	100.00%
Feb 2025	1			0	100.00%
Mar 2025	2			0	100.00%
Apr 2025	1			0	100.00%
May 2025	2			0	100.00%
Jun 2025	4			0	100.00%
Jul 2025	1			0	100.00%
Aug 2025	1			0	100.00%
Sep 2025	3			0	100.00%
Oct 2025	4			0	100.00%
Nov 2025	3			0	100.00%
Dec 2025	1			1	100.00%
Jan 2026	1			0	100.00%
Feb 2026				0	
Mar 2026				1	
Apr 2026				2	
May 2026				1	
Jun 2026				0	
Jul 2026	1			0	100.00%
Total	35			5	100.00%

Outcome of Anonymous Complaints (October, 2024 – July, 2026)

MonthYear	No Deficiencies	Deficiencies	Pending	Investigation not started	%No deficiency (Closed Cases)
Oct 2024				0	
Nov 2024	2			0	100.00%
Dec 2024				0	
Jan 2025	5			0	100.00%
Feb 2025				0	
Mar 2025	1			0	100.00%
Apr 2025	7			0	100.00%
May 2025	3			0	100.00%
Jun 2025	10			0	100.00%
Jul 2025	2			0	100.00%
Aug 2025	5	1		0	83.33%
Sep 2025	5			0	100.00%
Oct 2025	6			0	100.00%
Nov 2025	1			0	100.00%
Dec 2025	1	1		0	50.00%
Jan 2026	4			0	100.00%
Feb 2026	6			0	100.00%
Mar 2026	3	1		0	80.00%
Apr 2026	5	2		0	77.78%
May 2026	8			0	100.00%
Jun 2026	5	2		0	71.43%
Jul 2026	2			0	100.00%
Total	81	7		0	93.81%

*The start date for these charts correspond to the earliest open case for which a CDPH investigation has not yet started. Cases prior to this point have been closed and are not included in the current reporting.