

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 215022	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/17/2026
NAME OF PROVIDER OR SUPPLIER King David Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 4204 Old Milford Mill Road Baltimore, MD 21208	
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 0730 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Observe each nurse aide's job performance and give regular training. Based on review of Geriatric Nursing Assistant (GNA) personnel records and staff interviews, it was determined that the facility failed to provide documentation the yearly clinical performance evaluations/reviews occurred at least every 12 months for 3 (GNAs #8, #21, and #22) out of 6 GNA personnel records reviewed. Additionally, the facility failed to provide documentation of the annual mandatory 12-hour clinical education training for 3 (GNA #8, #21, #22) out of 6 GNA personnel files reviewed during an annual survey. The findings include: On 06/17/2026 between 12:42 PM and 1:34 PM the surveyor reviewed the employee HR files and found at least three GNA employees who did not have copies of their annual performance evaluations and or 12- hour annual clinical competency training in their HR folders.-The surveyor reviewed the human resources file for GNA #8 with a hire date of 10/04/2021, no documentation of annual performance evaluations was found since date of hire. Additionally, the last 12-hour annual clinical competency training was as of 04/09/2025.-The surveyor reviewed the human resources file for GNA # 21, with a hire date of 01/27/1981, no annual performance evaluation found since date of hire and the last 12- hour training was not present in the employee's personnel file for the years of 2025 and 2026.-The reviewed the human resources file for GNA #22, with a hire date of 04/18/2025, no annual performance evaluation or a 12-hour annual clinical competency nursing aide training for 2026. On 06/17/2026 at 2:08 PM the administrator was advised of which employee HR records did not have annual performance evaluations present in their HR files. Additionally, the surveyor informed the administrator which employees did not have copies of annual clinical education training. The administrator stated the current staff educator who is also the ADON has only been in the position for two months. The HR director continued to be out of the office per the administrator.		

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