

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 215197	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/19/2025
NAME OF PROVIDER OR SUPPLIER Fox Chase Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE 2015 East-West Highway Silver Spring, MD 20910	

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. (continued on next page)

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
---	-------	-----------

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 215197	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/19/2025
NAME OF PROVIDER OR SUPPLIER Fox Chase Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE 2015 East-West Highway Silver Spring, MD 20910	
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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, staff interviews, and resident interviews, the facility failed to provide comfortable room temperatures for 5 (Resident #1, #3, #5, #6, and #7) of 72 residents and 12 rooms and 3 common areas reviewed for comfortable room temperatures impacting resident activities and comfort. Findings included: Documentation on a quarterly Minimum Data Set assessment dated [DATE] revealed Resident #1 was coded as cognitively intact. Documentation on a quarterly Minimum Data Set assessment dated [DATE] revealed Resident #3 was coded as cognitively intact. Documentation on a quarterly Minimum Data Set assessment dated [DATE] revealed Resident #5 was coded as cognitively intact. Documentation on the entry Minimum Data Set assessment dated [DATE] revealed Resident #6 was coded as cognitively intact. Documentation on a quarterly Minimum Data Set assessment dated [DATE] revealed Resident #7 was coded as cognitively intact. Observations of rooms and hall temperatures with the interim Maintenance Manager (MM) on 12/15/2025 at 10:45 a.m. revealed: 47.6 degrees in room [ROOM NUMBER]; 50.0 degrees in room [ROOM NUMBER]; 39.5 degrees in room [ROOM NUMBER]; 37.7 degrees in room [ROOM NUMBER] and 49.6 in hall 3. Observation of room and halls temperatures on 12/16/25 at 10:22 a.m. revealed: room [ROOM NUMBER] at 63 degrees; room [ROOM NUMBER] at 53 degrees; room [ROOM NUMBER] at 61.9 degrees; room [ROOM NUMBER] at 53.8 degrees; room [ROOM NUMBER] at 66.0 degrees; room [ROOM NUMBER] at 48.0degrees; Hallway 2 at 58.5 (near room [ROOM NUMBER]); Hallway 3 at 64.8 (near room [ROOM NUMBER]); room [ROOM NUMBER] at 49.5 degrees; room [ROOM NUMBER] at 58.3 degrees and the Activity Room at 65.5 degrees. An interview was conducted with R7 on 12/15/25 at 9:34 a.m. R7 stated the facility had been cold since thanksgiving day. R7 stated that his/her room had been cold on and off and he/she was told the facility was working on it, but the room continued to be cold. R7 stated he/she had to use extra blankets to keep warm. R7 explained that they heard a big heater was placed in the hallway, but it did not help much. In an interview with R1 on 12/15/25 at 10:30 a.m. she stated that the facility had been cold and his/her family had to bring him/her extra blankets and a space heater. R1 explained that the heat broke down about a month ago. R5 was observed on 12/15/25 at 10:42 a. m. in his/her room seating in a wheelchair while covered in multiple blankets. R5 stated that the facility had been cold for a long time and stated that the cold was unbearable. In an interview with R3 on 12/15/25 at 10:44 a.m. he/she stated that the facility had been cold for a long time. R3 stated that they needed to wear a hoodie and be covered in multiple blankets to keep warm. In an interview with the Resident Council president (R6) on 12/15/25 at 12:48 p.m. revealed that the facility has been cold right after Thanksgiving Day this year. R6 explained that they were not doing any activities because the activity room was freezing. R6 further revealed that the heat was repaired last Saturday but broke down again. R6 stated that it was so cold that residents had to sleep in a thick hoodie and multiple blankets, and even then, could not get warm enough. R6 revealed that the heat issue had been a problem on and off for the last 3 years. During an interview with the interim maintenance manager on 12/15/25 at 9:55 a.m. he stated that he was covering the facility for only that day. He stated that he came to the building that morning and found the temperatures low as the heat has not been working properly since last week. He stated that two brand news heat units were installed on the roof last Saturday and one boiler was working but the other boiler was broken. He stated the broken part was ordered and he is not sure it will be fixed today. The facility Administrator was interviewed on 12/15/25 at 10:52 a.m. The Administrator explained that they have been experiencing problems without heat. She stated that [heating company], who take care of their boilers, 5 weeks ago brought bulbs that turned out to be the wrong size, and the next week they brought the correct size. She explained that the following week, they brought in the correct connector and bulb, but it still did not work. She explained that boiler 1 was working and that boiler 2 was not. She explained that they have 4 units, and 2 roof units did not work, serving the west hallway and rooms. She stated that one week ago, the facility paid money for a rooftop unit. She stated that the past Saturday, 12/13/25, morning, it was put on. She stated that the facility acquired temporary rental heat units for the 3 halls. She stated that they installed it on Saturday morning, 12/13/25, and everything was working right. She stated that on Sunday night and this morning it's cold again. She revealed that the owner of the heating company was coming in personally to figure out what was happening. She stated that the facility provided residents with additional blankets and served hot tea and coffee. She stated that there were no clinical concerns with the residents. She revealed that the room temperature on Saturday</p>		