

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 225540	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/27/2025
NAME OF PROVIDER OR SUPPLIER German Center for Extended Care		STREET ADDRESS, CITY, STATE, ZIP CODE 2222 Centre Street Boston, MA 02132	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>43963</p> <p>Based on records reviewed and interviews for one of three sampled residents (Resident #1) who had been admitted with a Stage II (partial loss of dermis) pressure ulcer, the Facility failed to ensure nursing staff provided care and services that met professional standards of practice related to timely follow up on recommendations regarding nutritional interventions to promote wound healing, and obtaining medication and/or treatment orders in a timely manner.</p> <p>Findings include:</p> <p>Resident #1 was admitted to the Facility in November 2024, diagnoses include fall with a left humeral (upper arm) fracture, anemia, Stage II pressure ulcer, and dementia.</p> <p>Review of Resident #1's Admission Skin Assessment, dated 11/01/24, indicated he/she had a Stage II pressure ulcer to his/her right buttocks and multiple skin tears to both arms/elbows upon admission.</p> <p>Review of Resident #1's Admission Minimum Data Set (MDS) Assessment, dated 11/07/24, indicated that he/she had significant cognitive impairment and had a Stage II pressure ulcer present upon admission.</p> <p>Review of Resident #1's Admission Dietary Assessment, dated 11/07/24, indicated he/she had a right buttocks pressure ulcer.</p> <p>The Dietary Assessment indicated the Register Dietician (RD) had made the following recommendations, add vitamins to promote wound healing, Multivitamin (MVI) with minerals one time daily, Vitamin C 500 milligrams (mg) two (2) times a day, and Zinc Sulfate 220 mg one time daily for one month.</p> <p>Review of Resident #1's Care Plan Titled, Risk for an Alternation in Nutrition, dated 11/07/24, indicated he/she was at risk for an alternation in nutrition status related to skin breakdown, a fracture, and dementia.</p> <p>Further review of the Care Plan indicated one of the Nutrition Interventions, dated 11/07/24, included to administer vitamins and minerals as ordered.</p> <p>Review of Resident #1's Physicians Orders, dated 11/08/24, indicated that his/her HCP had been invoked.</p> <p>(continued on next page)</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 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
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<p>F 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of Resident #1's Medical Record, including but not limited to, Medication Administration Records (MAR), Treatment Administration Records (TAR), Physician's Orders, and Nurse Progress Notes, indicated there was no documentation to support Nursing staff obtained any physician's orders related to administration of vitamins to help maintain his/her skin integrity, as recommended by the Registered Dietician.</p> <p>During an interview on 02/27/25 at 2:10 P.M., the Registered Dietician (RD) said she had not noticed that nursing had not review the recommendations that were made back on 11/07/24 and said she could not recall if she told a nurse about her recommendations.</p> <p>During an interview on 02/27/25 at 12:59 P.M., the Unit Manager said she was not aware that the recommendations that were made by the RD on 11/07/24 had not been followed up on.</p> <p>During an interview on 02/27/25 at 4:27 P.M., the Director of Nurses said that she was not aware Resident #1 had recommendations that were not addressed from the RD going back to 11/07/25.</p> <p>The DON said that the Facility's expectation was for the RD, once recommendations are made, was to physically hand the nurse responsible for the resident the recommendations to ensure they are followed up on in a timely manner with their physician.</p>		

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<p>F 0883</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>43963</p> <p>Develop and implement policies and procedures for flu and pneumonia vaccinations.</p> <p>Based on records reviewed and interview for one of three sampled residents (Resident #1), whose Health Care Proxy (HCP) had been invoked, and upon admission his/her Health Care Agent (HCA) signed consent and requested he/she be administered the Influenza (FLU) Vaccine, the facility failed to ensure nursing administered the vaccine as requested, and Resident #1 was not given the vaccine until more than three (3) months later.</p> <p>Findings include:</p> <p>Review of the Facility Policy titled Influenza Vaccine, undated, indicated that between October 1st and March 3rd each year, or when available, the influenza vaccine shall be offered to all residents and employees, unless the vaccine is medically contraindicated, or the resident or employee has already been immunized.</p> <p>Resident #1 was admitted to the Facility in November 2024, diagnoses include fall with a left humeral (upper arm) fracture, anemia, Stage II (partial dermis loss) pressure ulcer, and dementia.</p> <p>Review of Resident #1's Admission Minimum Data Set (MDS) Assessment, dated 11/07/24, indicated that he/she had significant cognitive impairment, and that no flu vaccine had been administered for the current season.</p> <p>Review of the Consent for Immunizations, signed and dated 11/01/24, indicated that Resident #1's HCA gave written consent for him/her to receive the flu vaccine.</p> <p>Review of Resident #1's Physicians Orders, dated 11/02/24, indicated that his/her HCP had been invoked.</p> <p>Review of Resident #1's medical record indicated that there was no documentation to support that Resident #1 had received the flu vaccine until 02/11/25, more than 3 months after requested and consent was provided by his/her HCA.</p> <p>During a telephone interview on 02/26/25 at 3:42 P.M., Resident #1's HCA said that on 11/01/24, she had requested and signed a consent for him/her to receive this season's flu vaccine.</p> <p>The HCA said she received a call on 01/09/25 from someone at the facility, asking if she wanted to have Resident #1 vaccinated for the flu.</p> <p>The HCA said she was very confused and told the facility that she had consented for the vaccine upon admission and did not know why he/she had not been vaccinated. The HCA said that she again consented for the facility to administer the flu vaccine at that time.</p> <p>The HCA said that on 02/10/25, a quarterly Care Plan meeting was held, and it was again brought to her attention that Resident #1 still had not received the flu vaccine.</p> <p>(continued on next page)</p>		

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<p>F 0883</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 02/27/25 at 12:59 P.M., the Unit Manager said that she does not recall ever seeing Resident #1's signed consents to receive any vaccinations. The Unit Manager said that the management team usually does do a chart review on all new admission, however, said it was never identified that Resident #1's HCA had signed a consent for receiving the flu vaccine upon admission.</p> <p>The Unit Manager said that Resident #1's HCA came to her sometime in January (exact date unknown) asking why he/she had not received the vaccine. The Unit Manager said that she thought the vaccine needed to be ordered, and said she had not administered the flu vaccine or informed the HCA.</p> <p>During an interview on 02/27/25 at 2:34 P.M., the Assistant Director of Nurses (ADON) said that he discovered that Resident #1 had not received the flu vaccine when he performed a facility audit.</p> <p>The ADON said he instructed the Unit Manager to call the HCA and ask if she wanted to have Resident #1 vaccinated and said he had no knowledge of the HCA signing consents for the vaccination upon admission.</p> <p>During an interview on 02/27/25 at 4:27 P.M., the Director of Nurses (DON) said that on 2/10/25, the Social Worker (SW) brought to her attention the concern Resident #1's HCA had regarding the flu vaccine not being administered since admission, that she had filled out a grievance form and then initiated an investigation.</p> <p>The DON said that she was unaware that Resident #1's HCA had signed the consent form allowing nursing to administer the flu vaccine upon admission until 02/27/25, the day of survey.</p> <p>The DON said that it was the Facility's expectation that the nurse obtaining consents to receive annual vaccines must inform the physician and obtain an order to administer the vaccine, once clarifying that they had not previously been vaccinated.</p> <p>The DON said they do not store vaccines in house, the nurse has to order it through the pharmacy and when the vaccine comes in, they are then able to administer vaccines as ordered by the physician.</p>		

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<p>F 0887</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.</p> <p>43963</p> <p>Based on records reviewed and interview for one of three sampled residents (Resident #1), whose Health Care Proxy (HCP) had been invoked, and upon admission his/her Health Care Agent (HCA) signed consent and requested he/she be administered the Covid-19 Vaccine, the facility failed to ensure nursing administered the vaccine as requested, and Resident #1 was not given the vaccine until more than three (3) months later.</p> <p>Findings include:</p> <p>Review of the Center for Disease Control information regarding Covid-19 vaccinations, dated 01/07/25, indicated the following;</p> <p>-The COVID-19 vaccine helps protect you from severe illness, hospitalization , and death; and</p> <p>-It is especially important to get your 2024-2025 COVID-19 vaccine if you are ages 65 and older, are at high risk for severe COVID-19, are living in a long-term care facility or have never received a COVID-19 vaccine.</p> <p>Resident #1 was admitted to the Facility in November 2024, diagnoses include fall with a left humeral (upper arm) fracture, anemia, Stage II (partial dermis loss), and dementia.</p> <p>Review of Resident #1's Admission Minimum Data Set (MDS) Assessment, dated 11/07/24, indicated that he/she had significant cognitive impairment.</p> <p>Review of the Consent for Immunizations, signed and dated 11/01/24, indicated that Resident #1's HCA signed the consent form for him/her to receive the Covid-19 vaccine.</p> <p>Review of Resident #1's Physicians Orders, dated 11/02/24, indicated that his/her Health Care Proxy had been invoked.</p> <p>Review of Resident #1's Nurse Progress Note, dated 12/19/24, indicated he/she tested positive for Covid-19.</p> <p>Review of Resident #1's medical record indicated that there was no documentation to support that Resident #1 had received the Covid-19 vaccine until 02/11/25, more than 3 months after administration of the vaccine had been requested and consent had been signed by his/her HCA.</p> <p>During a telephone interview on 02/26/25 at 3:42 P.M., Resident #1's HCA said that she had requested and signed a consent form for Resident #1 to receive the Covid-19 vaccine, upon admission back in November 2024.</p> <p>The HCA said she received a call sometime from someone at the facility on 01/09/25, asking if she wanted to have Resident #1 vaccinated for Covid-19.</p> <p>(continued on next page)</p>		

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<p>F 0887</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The HCA said she was very confused and told the facility that she had consented for the vaccine upon admission and did not know why he/she had not been vaccinated. The HCA said that she again consented for the facility to administer the Covid-19 vaccine to Resident #1 at that time.</p> <p>The HCA said that on 02/10/25, a quarterly Care Plan meeting was held, and it was again brought to her attention that Resident #1 had yet to receive the Covid-19 vaccine.</p> <p>During an interview on 02/27/25 at 12:59 P.M., the Unit Manager said that she does not recall ever seeing Resident #1's signed consent form to receive any vaccinations.</p> <p>The Unit Manager said that the management team usually does do a chart review on all new admission, but said it was not discovered that the HCA signed a consent form for receiving the Covid-19 vaccine upon admission.</p> <p>The Unit Manager said that Resident #1's HCA came to her sometime in January (exact date unknown) asking why he/she never received the vaccine. The Unit Manager said that she thought the vaccines needed to be ordered, said she had not administered the Covid-19 vaccine and had not informed the HCA.</p> <p>During an interview on 02/27/25 at 2:34 P.M., the Assistant Director of Nurses (ADON) said that he discovered Resident #1 has not received any vaccines since admission when he conducted an facility wide vaccine audit.</p> <p>The ADON said he instructed the Unit Manager to call the HCA and ask if she wanted to have Resident #1 vaccinated and said he had no knowledge that the HCA had provided written consent to the Covid-19 vaccination upon admission.</p> <p>During an interview on 02/27/25 at 4:27 P.M., the Director of Nurses (DON) said that on 02/10/25, the Social Worker (SW) had brought to her attention the concern Resident #1's HCA had regarding the Covid-19 vaccine not being administered since admission.</p> <p>The DON said that she was unaware that Resident #1's HCA had signed consent forms allowing nursing staff to administer the Covid-19 vaccines upon admission until 02/27/25, the day of survey.</p> <p>The DON said that it was the Facility's expectation that the nurse obtaining consent to receive any vaccines must inform the physician and obtain an order to administer the vaccine once clarifying that they had not previously been vaccinated.</p>		