STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	335498	A. Building B. Wing	08/27/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Grandell Rehabilitation and Nursing Center	645 W Broadway Long Beach, NY 11561

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 0838 Level of Harm - Potential for minimal harm Residents Affected - Many	Conduct and document a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day operations (including nights and weekends) and emergencies. (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

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0838 Level of Harm - Potential for minimal harm Residents Affected - Many	**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review and interviews during the Recertification Survey initiated on 08/21/2025 and completed on 08/27/2025, the facility did not ensure the Facility Assessment was updated to reflect the actual staffing levels. Specifically, the Facility assessment dated [DATE] inaccurately reflected the number of Registered Nurse Supervisors needed during the 11:00 PM-7:00 AM shifts and the number of Registered Nurses needed on the first floor during the 7:00 AM-3:00 PM shifts.The finding is:The facility policy, titled Facility Assessment, dated 01/15/2024, documented the interdisciplinary team members will conduct a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day operations and emergencies. The interdisciplinary team will review and update the assessment as necessary and at least annually. The interdisciplinary team will also review and update the assessment whenever there are, or the facility plans for, any changes that would require a substantial modification to any part of the assessment.The Facility assessment dated [DATE] documented under the heading: Facility Resources Needed to Provide Competent Support and Care for our Resident Population Every Day and During Emergencies two Registered Nurse supervisors on the 11:00 PM-7:00 AM shift and one Registered Nurse for the 7:00 AM- 3:00 PM shift on the first-floor nursing unit.Review of the projected staffing sheet for 08/22/2025 revealed three (3) Licensed Practical Nurses were scheduled for the first floor during the 7:00 AM-3:00 PM shift, and one Registered Nurse supervisor was scheduled for the 11:00 PM-7:00 AM shift. During an interview on 08/27/2025 at 9:34 AM, Staffing Coordinator #1 stated there are six nursing units at the facility, and each unit is staffed per shift based on the number of nursing staff listed on the par level (the minimum number of staff needed) sheet. Staffing Coordinator #1 stated staffing is not a problem as the facility utilizes a staffing agency to fill nursing staffing needs. Staffing Coordinator #1 stated there is only one Registered Nurse Supervisor required during the 11:00 PM-7:00 AM shift, according to the par level sheet. Staffing Coordinator #1 stated the first floor no longer had a Registered Nurse during the 7:00 AM-3:00 PM shift because the Registered Nurse position was replaced by a Licensed Practical Nurse.A review of the par level sheet revealed three Licensed Practical Nurses were required on the first-floor nursing unit during the 7:00 AM-3:00 PM shift and one Registered Nurse Supervisor for the 11:00 PM-7:00 AM shift.During an interview on 08/27/2025 at 10:50 AM, the Director of Nursing Services stated the Administrator entered the staffing numbers in the Facility Assessment. On the 11:00 PM-7:00 AM shift, the facility usually has one Registered Nurse supervisor assigned, but sometimes an extra Registered Nurse is scheduled to work, because there are a lot of admissions at night. The Facility Assessment documented the need for two Registered Nurse Supervisors during the 11:00 PM-7:00 AM shift and used the staffing on 03/06/2025 and 03/08/2025 as a guide; however, the staffing listed in the facility assessment related to Registered Nurse Supervisor and the Registered Nurse on the first floor is not constant.During an interview on 08/27/2025 at 11:17 AM, the Administrator stated they reviewed the staffing for 03/06/2025 and 03/08/2025 to document the staffing needs in Facility Assessment, but the numbers indicated in the Facility Assessment did not reflect daily staffing needs. The Registered Nurse requirement documented in the Facility Assessment for the first floor during the 7:00 AM-3:00 PM shift was no longer valid because the Licensed Practical Nurse replaced the Registered Nurse position. The change occurred about a month ago. The par levels have changed since the Facility Assessment was updated in March 2025, and the facility only needs one Registered Nurse Supervisor during the 11:00 PM-7:00 AM shift. 10 NYCRR 415.26