

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 335804	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/31/2026
NAME OF PROVIDER OR SUPPLIER The Pavilion at Queens for Rehabilitation & Nursin		STREET ADDRESS, CITY, STATE, ZIP CODE 36-17 Parsons Boulevard Flushing, NY 11354	
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 0580 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review and interview conducted during survey, the facility failed to immediately consult with the resident's physician, when there was a need to alter treatment significantly. This was evident in one out of five residents sampled (Resident #1). Specifically, Resident #1 had a Physician's Orders dated 07/15/2026 for BiPAP (bi-level positive airway pressure), IPAP (Inspiratory positive airway pressure):28, EPAP (Expiratory Positive Airway Pressure):5 settings. On 07/16/2026, the Director of Respiratory Therapy changed the BiPAP settings from 28/5 to 25/5 without notifying a physician and Resident #1's representative. The findings include: The facility policy titled 'Physician Orders' with a review date 01/2026 states that the purpose is to ensure that all physician or authorized practitioner orders are accurately received, documented, implemented, and monitored to provide safe, effective resident care. Telephone orders may be obtained from Medical Doctor, Physician Assistant, Nurse Practitioner if needed; the licensed nurse will read back the order to the Medical Doctor, Physician Assistant, Nurse Practitioner to ensure accuracy. Orders will be transcribed timely and accurately. The nurse will document in the progress notes any new or changes in Medical Doctor's orders. The facility policy titled 'Resident Change of Condition/Hospital Transfers' with a review date 01/2026 states in the standard of practice the nurse will notify the resident, resident's physician and the resident's designated representative in a timely manner, that is (i.e.) within the shift, when treatments must be significantly altered. Resident #1 was admitted to the facility with diagnoses including congestive heart failure (heart unable to pump enough blood), rheumatic heart disease complicated by mitral stenosis (narrowing of mitral valve opening), chronic respiratory failure with hypercapnia (too much carbon dioxide in the blood) and acute pulmonary edema (abnormal buildup of fluid in the lungs).The Minimum Data Set, a resident assessment tool, dated 07/16/2026 documented Resident #1 had moderately impaired cognition. Section O documented oxygen therapy continuous and non-invasive mechanical ventilator (BiPAP) on admission and while a resident. A review of Physician's Orders dated 07/15/2026 documented BiPAP, IPAP 28, and EPAP 5. FiO2 (Fraction of Inspired Oxygen is the percentage of oxygen in the air a person inhales) 40 percent apply at bedtime as tolerated and remove in AM (8:00 AM off and 9:00 PM on), monitor oxygen saturation and respiration.Record review revealed that there was no documented evidence that a physician, nursing supervisor and Resident #1's representative was notified of changes to BiPAP settings. During an interview on 07/20/2026 at 5:47 PM, Adult Child #1 (Complainant) stated the facility told them prior to Resident #1 admission that they would have a BiPAP machine available. Adult Child #1 stated when Resident #1 arrived at the facility on 07/15/2026 with Resident #1 and the facility did not have a BiPAP machine available for the resident. Adult Child #1 stated they were not notified on 07/16/2026 that the recommended settings for BiPAP machine were changed. During an interview on 07/21/2026 (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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F 0580 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	at 12:12 PM, Director of Respiratory Therapy stated they are responsible for ordering the BiPAP machine. Director of Respiratory Therapy stated they received a notification (hospital PRI) from facility admission department on 07/15/2026 at 12:38 PM stated Resident #1 would be on oxygen and BiPAP machine. Director of Respiratory Therapy stated they thought they ordered the BiPAP machine on 07/15/2026, but it was ordered on 07/16/2026 (unsure of time) with initial basic settings of 12/6. They stated they did not review the physician's order for BiPAP settings (28/5) before ordering the BiPAP machine. They stated the BiPAP machine arrived around 8:00 PM on 07/16/2026 and they checked the physician's order and set the machine at 25/5 because the machine could not tolerate settings over 25/5. They stated they did not notify the physician, nursing supervisor, nor nurse on the unit of changes in BiPAP settings. They stated they did not document anything from 07/15/2026 through 07/16/2026 in Resident #1 medical record. They stated at no time Resident #1 experienced any respiratory distress and that their oxygen saturation was 98 percent. During an interview on 07/21/2026 at 3:40 PM, Registered Nurse #1 stated they worked on 07/15/2026 and 07/16/2026 on the evening shift (3:00 PM to 11:00 PM). Registered Nurse #1 stated that the BiPAP machine arrived on 07/16/2026 (unsure of time) and that they were not notified that the BiPAP setting was changed and that a physician was not notified. During an interview on 07/22/2026 at 10:52 AM, Registered Nurse Supervisor #1 stated they admitted Resident #1 on 07/15/2026 (unsure of time) and notified Respiratory Department that Resident #1 would be on BiPAP. Registered Nurse Supervisor #1 stated they did not notify the Medical Doctor of the unavailability of the BiPAP machine because they believed the machine would arrive. They were not aware the BiPAP was not ordered. During an interview on 07/22/2026 at 10:21 AM, Medical Doctor #1 stated they were not aware the BiPAP machine was not delivered on 07/15/2026 and they were not aware the order settings that they reviewed on admission [DATE] with Registered Nurse Supervisor #1 were changed. 10 New York Codes, Rules, and Regulations 415.3(e)(2)(ii)(b)		

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F 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide safe and appropriate respiratory care for a resident when needed. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interviews and record reviews, the facility failed to provide specialized care needs for the provision of respiratory care in accordance with professional standards of practice, and the resident's care plan. This was evident in one out of five residents (Resident #1). Specifically, Resident #1 who was admitted from the hospital to the facility on [DATE] did not receive their BiPAP (bi-level positive airway pressure) at bedtime on 07/15/2026 as per physician's order. The BiPAP machine was ordered on 07/16/2026 and arrived at 8:00 PM on 7/16/2026. Additionally, Director of Respiratory Therapy changed the settings on the BiPAP machine on 07/16/2026 without notifying a physician and without a physician's order. The findings include: The facility policy titled 'Respiratory Management' with a review date 01/2026 documented the facility shall provide respiratory care services based on physician or authorized practitioner orders and individualized resident assessments. Respiratory care shall be performed by trained personnel within their scope of practice and according to applicable regulations. The purpose is to ensure that all residents requiring respiratory care receive safe, timely, evidence based, and physician -directed respiratory services while minimizing the risk of respiratory complications, infection transmission, equipment failure, and emergency events. Respiratory services shall include assessment, treatment, monitoring, documentation, equipment management, infection prevention, emergency response, interdisciplinary collaboration, and resident/family education. The facility policy titled 'Physician Orders' with a review date 01/2026 states that the purpose is to ensure that all physician or authorized practitioner orders are accurately received, documented, implemented, and monitored to provide safe, effective resident care. Telephone orders may be obtained from Medical Doctor, Physician Assistant, Nurse Practitioner if needed; the licensed nurse will read back the order to the Medical Doctor, Physician Assistant, Nurse Practitioner to ensure accuracy. Orders will be transcribed timely and accurately. The nurse will document in the progress notes any new or changes in Medical Doctor's orders. Resident #1 was admitted to the facility with diagnoses including congestive heart failure (heart unable to pump enough blood), rheumatic heart disease complicated by mitral stenosis (narrowing of mitral valve opening), chronic respiratory failure with hypercapnia (too much carbon dioxide in the blood) and acute pulmonary edema (abnormal buildup of fluid in the lungs).The Minimum Data Set, dated [DATE] documented Resident #1 had moderately impaired cognition. Section O documented oxygen therapy continuous and non-invasive mechanical ventilator (BiPAP) on admission and while a resident. A review of Physician's Orders dated 07/15/2026 documented BiPAP, IPAP 28, and EPAP 5. FiO2 (Fraction of Inspired Oxygen is the percentage of oxygen in the air a person inhales) 40 percent apply at bedtime as tolerated and remove in AM (8:00 AM off and 9:00 PM on), monitor oxygen saturation and respiration. There was no documented evidence of changes made to Resident #1's BiPAP settings. During an interview on 07/21/2026 at 12:12 PM, Director of Respiratory Therapy stated they received a notification from facility admission department on 07/15/2026 at 12:38 PM stating that Resident #1 would be on oxygen and BiPAP machine. Director of Respiratory Therapy stated that they are responsible for ordering the BiPAP machines and that they ordered the BiPAP on 07/16/2026 (unsure of time) and it arrived at around 8:00 PM on 07/16/2026. Director of Respiratory Therapy stated they did not check the physician's order before they ordered a BiPAP machine with initial basic settings of 12/6. Director of Respiratory Therapy stated they checked the physician's orders after receiving the BiPAP and that BiPAP could not tolerate physician's order settings of 28/5; therefore, they changed the BiPAP settings on the machine to 25/5. Director of Respiratory Therapy stated that they did not notify a (continued on next page)		

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F 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	nursing supervisor or physician of the changes. Director of Respiratory Therapy stated that they did not document anything in Resident 1's medical record and that Resident #1 did not experience any respiratory distress as a result. During an interview on 07/21/2026 at 3:40 PM, Registered Nurse #1 stated they worked on 07/15/2026 and 07/16/2026 on the evening shift (3:00 PM to 11:00 PM) and they notified Registered Nurse Supervisor #1 that the BiPAP machine was not available on 07/15/2026. Registered Nurse #1 stated they were not aware Director of Respiratory Therapy changed BiPAP settings on the machine without a physician's order on 07/16/2026. During an interview on 07/22/2026 at 10:52 AM, Registered Nurse Supervisor #1 stated they admitted Resident #1 on 07/15/2026 and notified the Respiratory Department that Resident #1 would be on BiPAP. During an interview on 07/22/2026 at 10:21 AM, Medical Doctor #1 stated they were not aware the BiPAP machine was not delivered on 07/15/2026 and was not aware Director of Respiratory Therapy changed the BiPAP settings on the machine. 10 New York Codes, Rules, and Regulations 415.12(k)(6)		

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F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, and interviews during survey conducted the facility failed to ensure medical records were complete and accurately documented in accordance with accepted professional standards and practices. Director of Respiratory Therapy failed to document changes in Resident #1's medical record. This was evident in one out of five residents sampled (Resident #1). Specifically, Resident #1 had a Physician's Orders dated 07/15/2026 for BiPAP (bi-level positive airway pressure), IPAP (Inspiratory positive airway pressure):28, EPAP (Expiratory Positive Airway Pressure):5 settings. On 07/16/2026, the Director of Respiratory Therapy changed the BiPAP settings on the machine from 28/5 to 25/5 on 07/16/2026 without a physician's order. The changes were not documented in Resident #1's medical record. The findings include: The facility policy titled 'Physician Orders' with a review date 01/2026 documented the purpose of the facility to ensure that all physician or authorized practitioner orders are accurately received, documented, implemented, and monitored to provide safe, effective resident care. Telephone orders may be obtained from Medical Doctor, Physician Assistant, Nurse Practitioner if needed; the licensed nurse will read back the order to the Medical Doctor, Physician Assistant, Nurse Practitioner to ensure accuracy. Orders will be transcribed timely and accurately. The nurse will document in the progress notes any new or changes in Medical Doctor's orders. Resident #1 was admitted to the facility with diagnoses including congestive heart failure (heart unable to pump enough blood), rheumatic heart disease complicated by mitral stenosis (narrowing of mitral valve opening), chronic respiratory failure with hypercapnia (too much carbon dioxide in the blood) and acute pulmonary edema (abnormal buildup of fluid in the lungs).The Minimum Data Set, dated [DATE] documented Resident #1 had moderately impaired cognition. Section O documented oxygen therapy continuous and non-invasive mechanical ventilator (BiPAP) on admission and while a resident. A review of Physician's Orders dated 07/15/2026 documented BiPAP, IPAP 28, and EPAP 5. FiO2 (Fraction of Inspired Oxygen is the percentage of oxygen in the air a person inhales) 40 percent apply at bedtime as tolerated and remove in AM (8:00 AM off and 9:00 PM on), monitor oxygen saturation and respiration).A review of the Treatment Administration Record dated from 07/15/2026 to 07/16/2026 revealed BiPAP settings of 28/5. Registered Nurse #1 applied the BiPAP and signed the treatment record at 9:00 PM. There was no documented evidence that BiPAP settings were changed in Resident #1's medical record to reflect on the 25/5 settings applied by Director of Respiratory on 07/16/2026. During an interview on 07/21/2026 at 12:12 PM, Director of Respiratory Therapy stated they received a notification from facility admission department on 07/15/2026 at 12:38 PM stating that Resident #1 would be on oxygen and BiPAP machine. Director of Respiratory Therapy stated that they are responsible for ordering the BiPAP machines and that they ordered the BiPAP on 07/16/2026 (unsure of time) and it arrived at around 8:00 PM on 07/16/2026. Director of Respiratory Therapy stated they did not check the physician's order before ordering the BiPAP with initial basic settings of 12/6. Director of Respiratory Therapy stated they checked the physician's order after receiving the BiPAP. Director of Respiratory Therapy stated the BiPAP they ordered could not tolerate physician's order settings of 28/5; therefore, they changed the BiPAP setting to 25/5. Director of Respiratory Therapy stated that they did not notify a nursing supervisor or physician of the changes. Director of Respiratory Therapy stated that they did not document anything in Resident 1's medical record. Director of Respiratory Therapy stated Resident #1 did not experience any respiratory distress. During an interview on 07/21/2026 at 3:40 PM, Registered Nurse #1 stated (continued on next page)		

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

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F 0842 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	they worked on 07/15/2026 and 07/16/2026 and they were not aware Director of Respiratory Therapy changed BiPAP settings on the machine on 07/16/2026. During an interview on 07/21/2026 at 1:32 PM, Assistant Director of Nursing stated the Director of Respiratory Therapy adjusted the BiPAP settings and that they should have notified Registered Nurse #1 on the unit of the new settings. Assistant Director of Nursing stated that Registered Nurse #1 would have called the doctor and obtained an order for new settings. Assistant Director of Nursing at the nurse signed the Treatment Record with initial physician's BiPAP settings at 28/5 on 07/16/2026 at 9:00 PM. During an interview on 07/22/2026 at 10:21 AM, Medical Doctor #1 stated they were not aware the BiPAP machine was not delivered on 07/15/2026 and was not aware Director of Respiratory Therapy changed the BiPAP settings on the machine. 10 New York Codes, Rules, and Regulations 415.22(a)(1-4)		