

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 335808	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/24/2026
NAME OF PROVIDER OR SUPPLIER Hempstead Park Nursing Home		STREET ADDRESS, CITY, STATE, ZIP CODE 800 Front Street Hempstead, NY 11550	
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 Note: The nursing home is disputing this citation.	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. Based on observation, record review, and interviews during the survey, the facility failed to ensure that each resident had a clean, comfortable, and homelike environment. This was identified for four (2 North, 2 South, 3 North, and 3 South units) of six units observed for environment. Specifically, during observations the day rooms and hallways in units 2 North, 2 South and 3 North had ripped sheetrock and peeling wallpaper; the shower rooms in units 2 South, 3 North and 3 South had torn privacy curtains; Unit 3 South resident bathroom was in an unsanitary condition with debris on the floor and had a foul odor; and unit 3 North resident bathroom was observed with missing wall tiles. Complaint #2717918The findings include:The facility policy titled Preventative Maintenance /Safety, dated 07/23/2025 documented the objective of the preventative maintenance /safety program is to assess, inspect, evaluate, and inventory equipment used for patient care. It is the policy of this facility to provide a safe, sanitary and comfortable environment for residents, staff, and visitors. The facility will make certain the building is always maintained in good repair. Residents' rooms, including floors, walls, ceiling, shall be clean and in good repair.The facility policy titled Homelike Environment dated 04/25/2025 documented the facility will ensure that all residents' rooms are cleaned and sanitized according to set standards to maintain a safe, sanitary and comfortable homelike environment. This includes ensuring that residents can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. Walls, blinds and window curtains in resident areas will be cleaned when these surfaces are visibly contaminated or soiled. Hallways, dining rooms, and shower rooms must be cleaned and mopped according to a set schedule.During an observation of the unit 2 North dining room, in the presence of Registered Nurse #4, on 06/09/2026 at 1:30 PM, there were 12 residents sitting in the dining room. The walls were observed with peeled wallpaper and exposed sheetrock. The wall behind the ice machine had raised (bubbled) area.During an observation on 06/09/2026 at 1:31 PM, unit 2 South dining/day room walls had peeled wallpaper with exposed sheetrock. There were 9 residents sitting in the dining room during the observation.During an observation, in the presence of the Director of Maintenance, on 06/09/2026 at 1:45 PM, the floor grout in unit 2 South shower rooms was soiled, and the privacy curtains were ripped.During an observation, in the presence of the Director of Maintenance, on 06/09/2026 at 1:50 PM, unit 3 South resident bathroom toilet seat and the bathroom floor were observed with dried, brown substance. The bathroom had a foul odor. The Director of Maintenance identified the dried brown substance as feces. Ripped toilet paper, three empty water cups, and three surgical gloves were observed on the bathroom floor. The two resident shower rooms on the third floor were observed with ripped shower curtains, and soiled tile floor grout. The third-floor day/dining room walls were ripped with exposed sheetrock and peeled wallpaper.During an interview on 06/09/2026 at 02:00 PM, Registered Nurse #4 stated the Environmental Services staff and the Administrator were aware of the physical condition of units 2 North and 2 South. Registered Nurse #4 stated there is a maintenance logbook to request repairs, but they did not document the conditions because the maintenance staff were aware.During an interview on 06/11/2026 at 10:05 AM, Houskeeper#1 stated they observe feces in the resident bathroom at least once a week and they clean it right away. (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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: Facility ID: 335808	If continuation sheet Page 1 of 2

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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some Note: The nursing home is disputing this citation.	Houskeeper #1 stated they must replace the ripped shower curtains. Houskeeper #1 stated the grout in the shower rooms cannot be washed and it needed to be replaced. During an observation, in the presence of the Corporate Director of Maintenance, on 06/11/2026 at 10:30 AM, the 3 North resident bathroom was missing wall tiles, and some were partially ripped. There was a foul odor in the resident bathroom. The 3 South hallway was observed with peeling wallpaper. The Corporate Director of Maintenance stated that the condition of the bathroom was not acceptable, and they will get it fixed. During an interview on 06/11/2026 at 10:40 AM, Housekeeper #2 stated that unit 3 South resident bathrooms always have feces on the toilet seat or on the floor despite daily cleaning. Housekeeper #2 stated the grout needs to be replaced because they could not remove the black discoloration when they attempted to clean it yesterday (06/10/2026). Housekeeper #2 stated they did not know how long the shower curtains were in disrepair and that they would now replace them. During an interview on 06/11/2026 at 12:21 PM, the Director of Maintenance stated there are ongoing constructions throughout the facility and they were aware of the environmental issues on the second and third floor including the ripped sheetrock and peeled wallpaper. The Director of Maintenance stated that unit 3 South has confused residents and that may be the contributing factor that the bathrooms in that unit sometimes have feces. They stated they will fix grouts in the bathrooms and the shower rooms. The Director of Maintenance stated it was not safe for the residents to use the bathroom with missing wall tiles in unit 3 North. The construction crew should have closed residents' access to the bathroom; however, they may have forgotten. The Director of Maintenance stated the facility was in the process of renovating the building because it is an old building and the construction was started approximately six months ago. During interview on 06/11/2026 at 02:46 PM, the Administrator stated the third-floor resident bathroom with missing tiles should not be accessible for residents' use. The Administrator stated that the facility was in the process of renovating the building and once the work is completed the residents will have a clean and homelike environment. 10 New York Code Rules and Regulations 415.5(h)(2)		