

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365764	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/04/2025
NAME OF PROVIDER OR SUPPLIER Centerville Health and Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 7300 McEwen Road Dayton, OH 45459	

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 - Few</p>	<p>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.</p> <p>44070</p> <p>Based on observations, staff interview, and resident interviews, facility failed to ensure resident rooms were maintained in clean, working order. This affected three (#23, #46, and #50) of three residents reviewed for environment. The facility census was 74.</p> <p>Findings include</p> <p>1. Observation on 03/04/25 at 11:51 P.M. in Resident #46's room with Licensed Practical Nurse (LPN) #220 revealed the floor around the packaged terminal air conditioner (PTAC) heating and cooling unit had several floor tiles which were loose. The floor on the right and left side was dark and appeared to be missing a floor surface. The left side had a hole about the size of a thumb in the flooring. A built-in shelf to the right of the PTAC machine was broken and caved in. Interview at the time of the observation with LPN #220 confirmed the observations.</p> <p>2. Observation on 03/04/25 at 9:40 A.M. of Resident #50's room revealed a floor board was loose and had fallen off the closet/wall and was sitting upside down on the floor. Both closet doors were broken and off the hinges.</p> <p>Interview on 03/04/25 at 11:53 P.M. with LPN #220 confirmed the observations.</p> <p>3. Interview on 03/04/25 at 12:18 P.M. with Resident #23 and a family member reported when she has the PTAC unit running on heat it gets dusty and has a bad smell. Resident #23 also stated it was dirty.</p> <p>Observation on 03/04/25 at 1:46 P.M. with Maintenance Director #225 revealed Resident #23's PTAC was dirty and had clumps of leaves and dirt. Interview at this time with Maintenance Director #225 verified the observation. He stated it was about due for a quarterly cleaning.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00162474.</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 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>44070</p> <p>Based on observations, staff and resident interviews, interview with the Pest Control Representative, review of pest control notes, and review of facility policy, the facility failed to maintain the kitchen and dining room area free from pests. This had potential to affect all 74 facility residents.</p> <p>Findings include:</p> <p>Review of pest control notes dated 09/30/24, 10/22/24, 11/27/24, 01/03/25 and 01/27/25 revealed the facility had treatments completed for roaches and mice traps were monitored.</p> <p>Observation and interview on 03/04/25 from 9:40 A.M. to 10:05 A.M. with Kitchen Manager (KM) #205 revealed facility had mice a few weeks ago but they had been treated. Observation of the food area found an extremely large amount of brownish black pellets. KM #205 verified these to be mouse excrement. These were found on baking sheets; in the roboku; in boxes of paper products; in boxes and containers of food such as chips, gelatin, condiments, and packaging with pop cans; on cookie sheets with food on it; and on the silverware holder. KM #205 could not confirm if the mouse droppings were new or old. Two large trashcans were also found to be uncovered. Two smaller trashcans had trash in them with no trash bag and were uncovered. KM confirmed the trash cans had no lids and he was unsure if the facility had lids for any trashcans.</p> <p>Observation and interview on 03/04/25 at 10:06 A.M. with Dietary Aide (DA) #210 confirmed both living and dead roaches were observed in the dining room in the last week. DA #210 confirmed roaches were found mainly along the side of the room closest to the staff hallway and the doors to the hallway. The area was observed to have a thick black line on the floor of dirt and debris including crumbs along the wall with a crevice that held the debris.</p> <p>Interview on 03/04/25 at 12:45 P.M. with the Pest Control Representative revealed the facility had been getting services for pest control. She reported the pest control agent would give recommendations to the facility on how to help rid pests in between visits. These recommendations could include cleaning, dealing with trash, and getting rid of pest debris such as excrement and dead insects to see new movement vs old movement. She also reported the facility was not paid up to date for services from 11/2024 through 02/2024.</p> <p>Interview and observation on 03/04/25 at 1:46 P.M. with Maintenance Director (MD) #225 and the Administrator confirmed observation of a black line along the dining room wall. MD #225 confirmed they had replaced base boards but the new ones did not fit the same way and facility needed a piece of quarter round to cover the crevice. They confirmed dirt and debris, including food crumbs, get swept and pushed into the crevice which would be enticing for insects, mice, or other pests. MD #225 confirmed the pest control company had provided directions for prep prior to their arrival for spaces they intend to treat, but also had given some basic instructions on cleanliness and keeping areas free of food and debris to help prevent ongoing issues. MD #225 confirmed he had not been checking on how staff follow those recommendations.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Review of facility policy titled Sanitation, dated 11/2022, revealed food service areas shall be maintained in a clean and sanitary manner, kept free and clear of garbage and debris and protected from rodents and insects. Kitchen waste shall be stored in clean leakproof tightly closed containers and disposed of daily and garbage containers shall be affixed with lids or otherwise covered.</p> <p>This deficiency represents non-compliance investigated under Master Complaint Number OH00162699, OH00162474 and OH00161757.</p>		