

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365795	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/11/2024
NAME OF PROVIDER OR SUPPLIER Oasis Center for Rehabilitation and Healing		STREET ADDRESS, CITY, STATE, ZIP CODE 850 East Midlothian Blvd Youngstown, OH 44507	

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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46195</p> <p>Based on observation, record review and interview, the facility failed to follow the menu as written. This affected two residents (#5 and #89) of five residents reviewed for nutrition and had the potential to affect all residents who received meals from the kitchen excluding seven residents (#7, #25, #44, #50, #52, #61 and #85) who the facility identified as receiving nothing by mouth. The facility census was 92.</p> <p>Findings include:</p> <p>1. Review of medical record for Resident #5 revealed an admitted [DATE]. Diagnoses included acute and chronic respiratory failure, morbid obesity due to excess calories, schizophreniform disorder, anxiety disorder, congestive diastolic heart failure, and major depressive disorder.</p> <p>Review of the quarterly Minimum Data Set (MDS) 3.0 assessment, dated 08/12/24, revealed Resident #5 was cognitively intact and was independent for eating.</p> <p>Review of physician orders revealed Resident #5 had a diet order dated 05/31/24 for CCHO (consistent carbohydrate)/NAS (no added salt) diet, mechanically altered chopped texture, thin liquids consistency.</p> <p>Observations conducted on 09/10/24 during initial facility tour from 8:14 A.M. to 8:35 A.M. revealed the posted menu in the dining room for breakfast on 09/10/24 revealed waffles, bacon, fruit cup, cream of wheat, milk and juice were to be served. Observation of Resident #5's breakfast tray revealed the resident was served two waffles, bacon, a bowl of dry cereal, milk and juice. Review of the dietary tray ticket sitting on the Resident #5's meal tray at the time of observation revealed under the dislike/do not serve section there was nothing noted indicating that fruit should not have been served and under the special instructions section it was indicated the resident wanted cold cereal instead of hot cereal.</p> <p>Interview with Resident #5 at the time of observation revealed she would have eaten the fruit cup if it had been served.</p> <p>Interview on 09/10/24 at 8:20 A.M. with Occupational Therapy Assistant #410 confirmed there was no fruit cup on Resident #5's breakfast tray.</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 0803</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview on 09/10/24 at 8:45 A.M. with Dietary [NAME] #362 revealed when asked why the fruit cup had not been served for breakfast, she stated she didn't see it on the menu.</p> <p>Interview on 09/11/24 with Ombudsman #433 revealed the biggest concern at the building for her was dietary, which included meals not matching the posted menu.</p> <p>Review of Oasis Healthcare Menu Extension Tuesday 09/10/24 revealed the CCHO diets were to receive one four ounce slotted spoodle (a type of serving utensil that is a combination between a spoon and a ladle) of fruit for breakfast</p> <p>Review of undated facility policy Accuracy of Quality of Tray Line Service revealed the meal will be checked against therapeutic diet spread sheet to assure that foods are served as listed on the menu and each meal will be checked for accuracy of following the therapeutic diet extensions.</p> <p>2. Review of medical record for Resident #89 revealed an admitted [DATE]. Diagnoses included acute kidney failure, type two diabetes, chronic kidney disease, and dysphagia.</p> <p>Review of the quarterly MDS 3.0 assessment, dated 06/12/24, revealed Resident #89 was moderately impaired cognitively and was independent for eating.</p> <p>Review of physician orders revealed a diet order dated 02/15/24 for a regular diet, mechanically altered ground texture, thin liquids consistency.</p> <p>Observations conducted on 09/10/24 during initial facility tour from 8:14 A.M. to 8:35 A.M. revealed the posted menu in the dining room for breakfast on 09/10/24 revealed waffles, bacon, fruit cup, cream of wheat, milk and juice were to be served. Observation of Resident #89's breakfast tray revealed the resident was served two waffles, ground sausage, a bowl of cream of wheat, milk and juice. Review of the dietary tray ticket sitting on Resident #89's tray at the time of observation revealed under the dislike/do not serve or special instructions sections, there was nothing noted indicating that fruit should not have been served.</p> <p>Interview on 09/10/24 at 8:23 A.M. with State tested Nursing Assistant #312 confirmed there was no fruit cup on Resident #89's breakfast tray.</p> <p>Interview on 09/10/24 at 8:45 A.M. with Dietary [NAME] #362 revealed when asked why a fruit cup had not been served for breakfast, she stated she didn't see it on the menu.</p> <p>Interview on 09/11/24 with Ombudsman #433 revealed the biggest concern at the building for her was dietary, which included meals not matching the posted menu.</p> <p>Review of Oasis Healthcare Menu Extension Tuesday 09/10/24 revealed mechanical soft ground texture diets were to receive one four-ounce portion of diced peaches for breakfast.</p> <p>Review of undated facility policy Accuracy of Quality of Tray Line Service revealed the meal will be checked against therapeutic diet spread sheet to assure that foods are served as listed on the menu and each meal will be checked for accuracy of following the therapeutic diet extensions.</p> <p>This deficiency represents noncompliance investigated under Complaint Number OH00157225.</p>

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46195</p> <p>Based on observation, record review and interview, the facility failed to ensure palatable food was served to all residents. This affected three residents (#36, #39 and #45) of five residents reviewed for nutrition and had the potential to affect all residents receiving meals from the kitchen. The facility identified seven residents (#7, #25, #44, #50, #52, #61, and #85) as not receiving anything by mouth. The census was 92.</p> <p>Findings include:</p> <p>1. Review of the spread sheet for lunch on 09/10/24 revealed one three ounce chicken breast, one four ounce spoodle or one number eight scoop of parmesan creamed noodles, one four ounce slotted spoodle of French style green beans, one dinner roll, mixed fruit, milk of choice and beverage of choice was to be served.</p> <p>During observation of tray line on 09/10/24 between 11:45 A.M. and 1:15 P.M. revealed the noodles appeared to not have any cream sauce on them.</p> <p>Interview on 09/10/24 at 12:00 P.M. with Dietary [NAME] #362 confirmed there was no cream sauce on the noodles. She stated she had put butter and dried parmesan on the noodles and had no recipe for the parmesan creamed noodles.</p> <p>Interview on 09/10/24 at 12:01 with Dietary Director (DD) #366 revealed the recipe book had been in his office, and he was in the process of updating the recipes.</p> <p>Observation of the recipe book on 09/10/24 at 12:27 P.M. with DD #366 revealed there was no recipe in the book for parmesan creamed noodles, and DD#366 confirmed a recipe for parmesan creamed noodles had not been printed out until the state surveyor had asked for one on 09/10/24. DD#366 went on to say Dietary [NAME] #366 should be following recipes, and if she was unsure, she should have asked.</p> <p>On 09/10/24 at 1:05 P.M., a test tray was observed by the state surveyor as the last cart was beginning to be loaded. At 1:14 P.M., Dietary [NAME] #366 plated the test tray and the test tray was then loaded onto the food cart. At 1:15 P.M., the dietary cart with the test tray on it was taken to the 400 hall. By 1:21 P.M. the seventeen trays on the dietary cart had been passed and DD#366 took the test tray off the cart and took the tray to a table in the main dining room. DD #366 used a calibrated facility thermometer to take the temperatures of the items on the test tray. The temperature of the chicken was 151 degrees Fahrenheit (F), the green beans were 141 degrees F, the noodles were 151 degrees F., the canned peaches were 58 degrees F, the milk was 43.6 degrees F, and the coffee was 163.3 degrees F. As DD# 366 was taking the temperature of the items, the state surveyor was tasting the items. The chicken tasted warm, was moist and had good flavor. The noodles tasted warm but were bland and had no flavor. The green beans tasted warm but were bland and had no flavor. The fruit tasted cold and had good flavor. The milk tasted cold and did not taste spoiled. The coffee was very warm and had a good flavor. After DD #366 had taken the temperature of the items, he tasted the chicken and felt it tasted warm and had good flavor. When he tasted the green beans, he felt the green beans were bland and were over cooked. When he tasted the noodles, he felt they were undercooked and had no flavor.</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of recipe for Parmesan Cream Noodles, dated 09/10/24, confirmed the facility had not followed the recipe. According to the recipe, for 83 four-ounce servings the facility would have needed five and one half pounds of egg noodles, one quart milk, two cups butter, one and one-eighth quart of water, six and two-thirds tablespoons chicken base, one pound parmesan cheese grated, one and one-eighth teaspoons of lemon pepper, and one and one-eighth teaspoon of Italian seasoning and one half cup flour. For the sauce, milk, butter and water were to be brought to a simmer. The chicken base was then to be added, and the mixture was to be stirred well. The mixture was then to be thickened with roux to a light gravy consistency. The parmesan cheese was to be added to the mixture and the mixture was to be removed from the heat. The sauce was to be tasted and adjusted with seasonings if necessary. The sauce was then to be added to the cooked noodles.</p> <p>2. Review of medical record for Resident #39 revealed an admitted [DATE]. Diagnoses included primary pulmonary hypertension, morbid obesity due to excess calories, type two diabetes without complications, heart failure and depression.</p> <p>Review of physician orders revealed a diet order dated 09/05/23 for CCHO (Consistent Carbohydrate) /NAS (No Added Salt) diet, mechanically altered chopped texture, thin liquid consistency.</p> <p>Review of quarterly Minimum Data Set (MDS) 3.0 assessment, dated 08/14/24, revealed Resident #39 was cognitively intact and was independent for eating.</p> <p>Interview on 09/10/24 at 2:12 P.M. with Resident #39 revealed a lot of the food was bland and for lunch on 09/10/24, the noodles tasted bland.</p> <p>3. Review of medical record for Resident #45 revealed an admitted [DATE]. Diagnoses included sepsis, chronic obstructive pulmonary disease (COPD), morbid obesity with aveolar hypoventilation, multiple sclerosis, major depressive disorder, resistive to multiple antibiotics, and acute on chronic diastolic (congestive) heart failure.</p> <p>Review of Resident #45's physician orders revealed a diet order dated 08/06/ 24 for CCHO, Regular texture, and thin liquids consistency.</p> <p>Review of modification of end of the MDS assessment, dated 08/06/24, revealed Resident #45 was cognitively intact and was independent for eating.</p> <p>Interview on 09/10/24 at 2:13 P.M. with Resident #45 revealed the facility does not use seasoning, and the food was bland.</p> <p>4. Review of Resident #36 revealed an admitted [DATE]. Diagnoses included osteomyelitis left ankle and foot, type two diabetes, unspecified chronic bronchitis, generalized anxiety disorder, chronic kidney disease stage four, acute respiratory failure with hypoxia, bipolar disorder, and depression.</p> <p>Review of Resident #36's physician orders revealed a diet order, dated 02/27/24, for CCHO/NAS diet, regular texture, thin liquids.</p> <p>Review of quarterly MDS assessment, dated 08/13/24, revealed Resident #36 was cognitively intact and was independent for eating.</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview on 09/10/24 at 2:26 P.M. with Resident #36 revealed the food was terrible and bland.</p> <p>Interview on 09/11/24 with Ombudsman #433 revealed the biggest concern at the building for her was dietary, which included meals not matching the posted menu.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00157225.</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>46195</p> <p>Based on observation, record review and interview, the facility failed to ensure food was stored, prepared and served under sanitary conditions. This had the potential to affect all residents who received meals from the kitchen. The facility identified seven residents (#7, #25, #44, #50, #52, #61, and #85) as receiving nothing by mouth. The census was 92.</p> <p>Findings include:</p> <p>1. Observation of the kitchen on 09/10/24 from 8:14 A.M. to 8:35 A.M. with Cook/Assistant Dietary Director (DD) #365 and DD #366 revealed the following concerns:</p> <p>In the walk in cooler, there was one half factory bag of shredded mozzarella cheese opened and resealed with plastic wrap with no date; four waffles wrapped in plastic wrap with no date; one hardboiled egg wrapped in plastic wrap with no date; one factory bag with four hardboiled eggs opened and resealed with plastic wrap with no date, and two opened, approximately four inch, stacks of sliced American cheese resealed with plastic wrap with no date.</p> <p>On a metal shelf under the exhaust hood to the left of the ovens revealed an opened bag with an unidentified product, which looked like brown sugar, which had been resealed with plastic wrap with no date or label.</p> <p>In the dry storage area, there was one half bag of dried penne pasta which was open to air.</p> <p>At the time of observation, DD#366 confirmed items opened should be resealed, labeled, and dated.</p> <p>Review of undated facility policy Food Storage, revealed all foods should be covered, labeled and dated.</p> <p>2. Observation of the kitchen on 09/10/24 from 8:14 A.M. to 8:35 A.M. with Cook/Assistant Dietary Director (DD) #365 and DD #366 revealed the sticker on the facility exhaust hood revealed it had been last cleaned commercially in January 2024.</p> <p>Observation of the four square shaped vents in the hood range revealed there was an accumulation of dust and debris visible in the square vents.</p> <p>At the time of observation, DD #366 confirmed the areas of concern in the exhaust hood and stated the hood should be cleaned professionally every six months.</p> <p>(continued on next page)</p>

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Interview on 09/11/24 at 10:14 A.M. with the Administrator confirmed the exhaust hoods had not been cleaned every six months as required. He stated the facility was supposed to be on a schedule, where every January and July a commercial company was to come to the facility to clean the exhaust hoods. He stated the commercial company had reached out to the previous maintenance person's phone for a confirmation to come and clean the hoods. The company never got that confirmation since that maintenance person no longer worked for the facility, and as a result, the facility was skipped for the July cleaning.</p> <p>Review of undated policy Hood Cleaning revealed hood cleaning venting system shall be cleaned regularly by a system professional to reduce the potential for a grease fire. The Dining Services director or designee arranges with outside service for cleaning of hood ventilation system. Service would be performed at least every six months. Each hood will have a sticker attached that shows date of last professional cleaning.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00157225.</p>		

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<p>F 0835</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Administer the facility in a manner that enables it to use its resources effectively and efficiently.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46195</p> <p>Based on observation, interviews, and review of facility policies, facility menu, and job descriptions, the facility administration failed to ensure there was an adequate supply of emergency food and water on hand as required. This had the potential to affect all 92 residents in the facility. The facility census was 92.</p> <p>Findings include:</p> <p>Review of the administrator job description revealed the administrator was responsible for establishing systems to enforce the facility policies and procedures and to ensure compliance with all federal, state, and local regulations.</p> <p>Review of maintenance supervisor job description revealed the maintenance supervisor would observe all facility policies and procedures and develop and implement maintenance systems to meets residents' needs in compliance with federal, state and local requirements.</p> <p>Review of Food Service Director job description revealed the food service director would implement dietary and food service policies and procedures to meet residents' needs and in compliance with federal, state, and local requirements and a monitoring system for the dietary and food service department. The food service director would also make recommendations for implementation to assure compliance with federal, state, and local requirements, which included purchase or requisition of food, equipment and supplies.</p> <p>Review of the facility document titled HPSI Emergency Menu Plan Manual revealed the facility had a seven day emergency menu which included shelf stable milk, pop tarts, granola bars, tuna salad, chicken salad, vegetable beef stew, chili with beans, pimento cheese sandwiches, beef ravioli and various canned fruits. The manual indicated approximately two gallons of water per person per day should be stored for drinking, food preparation and hygiene.</p> <p>Observation of the kitchen on [DATE] from 8:46 to 8:57 A.M. with Dietary Director (DD) #366 and Cook/Assistant DD #365 revealed there were bare spots on the shelves in the dry storage area and in the walk-in coolers and freezers. Upon further review of the stock in the freezer and refrigerator and the facility emergency menu revealed an inadequate supply of food items to support the emergency menu. DD#366 confirmed the facility did not have an emergency supply of food as required.</p> <p>Interview on [DATE] at 3:06 P.M. and on [DATE] at 8:07 A.M. with Maintenance Director #401 revealed there was not an emergency supply of water in the building. He went on to state the facility had an emergency water supply in the past, but the facility got rid of the emergency water supply in [DATE] since the stored water bottles were exploding and the water had expired. When asked what the facility would do if there was a water line break, Maintenance Director #401 stated I don't know what I would do if there was a disaster of drinkable water. I don't know what we would do. He stated he had brought the concern to Maintenance Director #402, who did the ordering, that the facility needed to have an emergency water supply. Maintenance Director #401 stated he had lost sleep over it, all the time.</p> <p>(continued on next page)</p>		

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<p>F 0835</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Observation of the dry food storage area and the central supply area on [DATE] from 3:30 P.M. to 3:35 P.M. with Maintenance Director #401 confirmed there was no emergency supply of water in the facility.</p> <p>Interview on [DATE] at 9:19 A.M. with Maintenance Director #402 revealed the facility had ordered pallets of water about two years ago, and since they had been sitting so long, the containers broke and leaked and then they expired. He stated he had brought up to the Administrator the concern about not replenishing the emergency water supply. Maintenance Director #402 felt the concern had been ignored and thought maybe something had changed and the facility no longer needed a supply of emergency water. Maintenance Director #402 stated he probably should have asked if the facility still needed a supply of emergency water.</p> <p>Interview on [DATE] at 10:14 A.M. with the Administrator revealed he knew the facility had issues with the cases of the stored water breaking and then they expired. He stated the facility never got around to ordering more emergency water, but he knew the facility needed to have an emergency supply of water at the facility. The administrator went on to state he knew the supply of food got close on food delivery day but only having food for the day of delivery was too close.</p> <p>Review of facility undated policy Food and Nutrition Services Disaster Plan revealed in case the facility was unable to receive deliveries an emergency supply of food, beverages, and supplies must be available in the facility and a minimum of a three to seven day supply was recommended. In case of no water supply or water supply was shut off, the facility should have an emergency potable water supply equivalent to one half gallon per person/day minimum for drinking and one half gallon/person per day for other uses for at least seven days or per regulatory requirements.</p> <p>This deficiency represents noncompliance as an incidental finding during investigation of Complaint Number OH00157225.</p>