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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366291 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/16/2026 |
| NAME OF PROVIDER OR SUPPLIER Astoria Health & Rehab Center | | STREET ADDRESS, CITY, STATE, ZIP CODE 300 Astoria Road Germantown, OH 45327 | |

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

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| (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 - Many</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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on record review, observation, review of facility policy, resident interview, and staff interview, the facility failed to ensure bed linens were applied to the beds of residents using an air mattress. This affected three (#27, #13, and #11) out of ten residents reviewed for linen use on beds. This also affected six residents (#2, #60, #33, #36, #15, and #40) identified by the facility to be using an air mattress on the bed and cognitively impaired. Additionally, the facility failed to have an adequate number of clean towels and washcloths on hand for resident care. This had the potential to affect all residents. The total census was 45. Findings include-1. Review of the medical record revealed Resident #27 was admitted to the facility on [DATE]. Diagnoses included Alzheimer's disease and type two diabetes mellitus. Review of the most recent Minimum Data Set (MDS) 3.0 assessment dated [DATE] revealed Resident #27 had moderately impaired cognition and required assistance to roll left and right in bed. Review of the provider orders dated 06/17/25 revealed an air mattress ordered for use to Resident #27's bed. Observation on 04/15/26 at 9:13 A.M. revealed Certified Nursing Assistant (CNA) #48 completing care for Resident #27. There was no flat sheet on the resident's bed covering the air mattresses. Interview at this time with CNA #48 confirmed they only use chux pads (incontinence pads) under residents with air mattresses and no sheet is used to cover the mattress. Facility identified Resident #27 has a Drive Air Mattress. Review of the Drive Air Mattress Owner's Manual, undated, revealed Drive air mattress support surfaces are designed to be used with appropriate linens. Deep pocketed fitted or flat sheets are recommended. 2. Review of the medical record revealed Resident #13 was admitted to the facility on [DATE]. Diagnoses included occlusion and stenosis of bilateral carotid arteries, muscle weakness, neuralgia and neuritis, and age related physical debility. Review of the most recent MDS 3.0 assessment dated [DATE] revealed Resident #13 had severe impaired cognition and required substantial assistance with rolling left and rolling right. Observation 04/15/26 at 9:25 A.M. revealed Resident #13 did not have a flat sheet between her and the air mattress. The facility identified that Resident #13 has a Drive Air Mattress. Interview on 04/15/26 at 9:35 A.M. with Clinical Support #4 revealed no flat sheets are used when residents have air mattresses, they only use chux pads. 3. Review of the medical record revealed Resident #18 was admitted to the facility on [DATE]. Diagnoses included cerebral infarction. Review of the most recent MDS 3.0 assessment dated [DATE] revealed Resident #18 had moderately impaired cognition and required substantial assistance with personal care. Observation on 04/15/26 at 10:07 A.M. revealed Resident #18 was in the bed. Resident #18 had no sheet between him and the mattress, only a chux pad was observed in place. Facility identified that Resident #18 has a Drive Air Mattress. Interview on 04/15/26 at 10:37 A.M. with Clinical Support #4 confirmed no bottom sheet are used when residents have an air mattress, but some CNAs use just chux pads and some use a bottom flat sheet. Interview on 04/15/26 at 10:43 A.M. with Assistant Director of Nursing (ADON) #29 revealed when residents with an air mattress are on hospice, they do not use a bottom or flat sheet, only the chux pads. ADON #29 also stated it depends on the resident whether they should have a bottom sheet or not. ADON #19 could not answer how a CNA would know what residents were to use a bottom sheet. Interview on (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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p> | <p>04/15/26 at 10:56 A.M. with Licensed Practical Nurse (LPN) #19 revealed they only use the chux with residents who have air mattresses. No sheet or anything else is used between residents and the mattresses. Interview on 04/15/26 at 12:29 P.M. with CNA #14 revealed only use a chux pad with residents who have air mattresses. No sheet or anything else is used between residents and the mattresses. Interview on 04/15/26 at 1:40 P.M. with the Director of Nursing (DON) revealed if the resident wants a flat sheet under them then the staff will put one on. The DON also stated if a resident is cognitively impaired then they would not place a flat sheet under the resident. Interview on 04/16/26 at 8:14 A.M. with the ADON #29 confirmed that sheets should be used between residents and the air mattresses. ADON #29 confirmed the use of air mattresses manufacturers Span, Drive and Proactive Protek. The facility identified nine residents (#2, #11, #13, #15, #27, #33, #36, #40 and #60) who were cognitively impaired and use an air mattress. 4. Observation on 04/14/26 at 9:29 A.M. with Director of Maintenance (DOM) #20 and Housekeeper #18 in the only linen room revealed 14 towels and approximately 50 washcloths. There were 15-20 pieces of blankets cut into wash cloth size, with raggedy frayed edges, strings all over them and stains with the regular washcloths on the shelf ready for use. Interview at this time with Housekeeper #18 confirmed the cut up wash cloths have been put out for use with the regular wash cloths for a couple of weeks because the facility does not have enough wash cloths. Interview on 04/14/26 at 12:56 P.M. with the DOM #20 confirmed the cut up washcloths and stained washcloths were removed from the shelf. Interview on 04/14/26 at 1:02 P.M. with DOM #50 revealed 100 towels should be in the linen room and 150 washcloths should be in the linen room. The DOM #50 confirmed the facility has had a linen shortage of washcloths and towels due to staff possibly disposing of them after use. The DOM# 50 stated the Administrator orders them when needed. The DOM #50 also stated that on occasion, night shift staff would cut up blankets for washcloths when they ran out. DOM #50 confirmed blankets should not be cut up and used as washcloths. Observation and interview on 04/14/26 at 1:36 P.M. with Clinical Support #4 in the linen closet confirmed 38 cut up blankets for washcloths and four stained washcloths present. Interview on 04/15/26 at 10:56 A.M. with LPN #19 revealed they have ran out of washcloths and towels for residents. Interview on 04/15/26 at 12:29 PM with CNA #14 revealed they have ran out of washcloths and towels for bathing residents and don't have anything else to use. CNA #14 stated they will use towels as washcloths if no washcloths are available. CNA #14 stated washcloths that are cut up from a blanket are used if no washcloths or towels are available. Interview on 04/15/26 at 12:29 PM CNA #14 stated they have run out of towels and washcloths often in the last three months and feels can't give appropriate resident care. CNA #14 also stated cut up washcloths from blankets are sometimes on the shelves and will use them as a last resort. Interview on 04/15/26 at 1:40 P.M. the DON stated staff have come to her with concerns regarding running low on towels and washcloths. The DON stated this issue has been added to the Quality Assurance Performance Improvement (QAPI). The DON stated she was aware of the cut up blankets on the shelf with the other washcloths last week and threw them away. The DON was unaware of who was cutting them up. Review of the facility concern log dated 04/02/26 revealed Resident #56 reported no wash cloths were available. The result was to order 20 dozen more. Review of the admission Agreement dated 09/09/20, the facility will provide basic services as required by law to the resident including washcloths and towels. Review of the policy titled Laundering Processing of Linens, dated 04/2026, revealed linens will be laundered and processed in a manner which results in a clean and visually acceptable end product. This deficiency represents non-compliance investigated under Complaint Number 2726616.</p> | | |