

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  395042	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/19/2025
NAME OF PROVIDER OR SUPPLIER  Nightingale Nursing and Rehab Center		STREET ADDRESS, CITY, STATE, ZIP CODE  607 East 26th Street Erie, PA 16504	

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 0605</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Prevent the use of unnecessary psychotropic medications or use medications that may restrain a resident's ability to function.</p> <p>Based on review of facility policy and clinical records and staff interview, it was determined that the facility failed to provide evidence that non-pharmacological interventions (interventions attempted to calm a resident other than medication) were attempted prior to the administration of a PRN (as needed) psychotropic (affecting the mind) medication for one of four residents reviewed for unnecessary medications (Closed Record Resident CR2) Findings include: Facility policy entitled Psychotropic Medication Use, dated 1/7/2025, indicated that Non-pharmacological approaches are used (unless contraindicated) to minimize the need for medications, permit the lowest possible dose, and allow for discontinuation of medications when possible. Resident CR2's clinical record revealed an admission date of 9/20/25, with diagnoses that included Diabetes (a health condition caused by the body's inability to produce enough insulin), Anxiety (a condition that causes a person to be nervous, uneasy, or worried about something or someone), and High Blood Pressure. Resident CR2's clinical record revealed a physician's order dated 9/20/25, for Lorazepam (anti-anxiety medication) 0.5 milligrams (mg) by mouth every eight hours PRN for anxiety and a physician's order dated 9/25/25, for Lorazepam 0.5 mg by mouth routinely at bedtime and every eight hours PRN for anxiety. Resident CR2's September 2025 Medication Administration Record (MAR) revealed that the PRN Lorazepam was used six times (9/21/25 two times, 9/22/25, 9/23/25, 9/24/25, and 9/26/25). Review of September MAR and clinical record progress notes revealed that there was no evidence of non-pharmacological interventions being attempted prior to the administration of the PRN Lorazepam six of the six times it was used. During a telephone interview on 11/19/25, at 9:24 a.m. Nursing Home Administrator confirmed that the facility lacked evidence of non-pharmacological interventions being attempted prior to the administration of a PRN anti-anxiety medication for each time it was administered. for Resident CR2. 28 Pa. Code 211.12(d)(1)(3)(5) Nursing services</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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