

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395052	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/22/2024
NAME OF PROVIDER OR SUPPLIER Rosewood Gardens Rehabilitation and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 146 Marple Road Broomall, PA 19008	

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 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>35913</p> <p>Based upon clinical record review, it was determined the facility failed to ensure Minimum Data Set Assessments were completed accurately for two of 28 residents reviewed (Resident 46 and 106 Resident).</p> <p>Findings include:</p> <p>Review of Resident 46's Quarterly Minimum Data Set (MDS - periodic assessment of resident needs) dated September 4, 2024, revealed Resident 46 had a right foot pressure ulcer (opening of the skin caused by prolong pressure applied to an area).</p> <p>Review of Resident 46's clinical record revealed Resident 46 had a right foot wound as a result of an injury.</p> <p>Further review of Resident 46's clinical record failed to reveal evidence of a right foot pressure ulcer.</p> <p>Interview with the Director of Nursing on November 24, 2024 at 8:50 a.m. confirmed the MDS was inaccurately completed and further confirmed Resident 46 did not have a right foot pressure ulcer.</p> <p>A review of Resident 106's Annual Minimum Data Set (MDS- A standardized assessment tool that measures health status in long-term care residents) dated September 15, 2024, revealed resident was taking an Antipsychotic medication (Are prescription medications that treat certain disorders by changing how the brain works).</p> <p>A review of Resident 106's September 2024, Medication Administration Records revealed resident were on Lexapro and Remeron (A medication used for depression) and Lorazepam (A medication for anxiety). Clinical records failed to reveal that Resident was on Antipsychotic medication.</p> <p>An interview with licensed nurse Employee E3 was conducted on November 21, 2024, at 11:57 a.m. Employee E3 confirmed Resident 106 was not taking Antipsychotic medication and that MDS was coded in error.</p> <p>The facility failed to ensure residents' assessments were completed accurately.</p> <p>28 PA Code 211.5(a)(b)(f) Clinical Records</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 0661</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure necessary information is communicated to the resident, and receiving health care provider at the time of a planned discharge.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 22502</p> <p>Based on a review of the clinical record and staff interview, it was determined that the facility failed to ensure that a complete discharge summary was done for one of one residents reviewed (Resident 12).</p> <p>Findings include:</p> <p>Review of Resident 12's clinical record revealed that the resident was admitted to the facility on [DATE]. Review of progress notes revealed that the resident had a planned discharge on November 8, 2024. Further review of the clinical record revealed no documented evidence that the physician completed a discharge summary with a recapitulation of the resident's stay at the facility.</p> <p>Interview with the Nursing Home Administrator and Director of Nursing on November 22, 2024, at 11:30 a.m. confirmed that the recapitulation was not completed prior to discharge.</p> <p>28 Pa Code 211.5 (f) Clinical records</p>

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>35913</p> <p>Based upon clinical record review, it was determined the facility failed to ensure resident records contained accurate documentation for one of 28 residents reviewed (Resident 46).</p> <p>Findings include:</p> <p>Review of Resident 46's Quarterly Minimum Data Set (MDS - periodic assessment of resident needs) dated September 4, 2024, revealed Resident 46 had a right foot pressure ulcer (opening of the skin caused by prolong pressure applied to an area).</p> <p>Review of Resident 46's clinical record revealed Resident 46 had a right foot wound as a result of an injury that occurred on July 3, 2024.</p> <p>Further review of Resident 46's clinical record failed to reveal evidence of a right foot pressure ulcer.</p> <p>Review of wound tracking documentation completed by the wound nurse from July 2024 through September 2024, revealed Resident 46 had a right foot pressure ulcer.</p> <p>Review of progress notes completed by the Nurse Practitioner from July 2024, through September 2024, further revealed Resident 46 had a right foot pressure ulcer.</p> <p>Interview with the Director of Nursing on November 24, 2024, at 8:50 a.m. confirmed Resident 46 did not have a right foot pressure ulcer and further confirmed that documentation in Resident 46's clinical record was inaccurate as Resident 46 did not have a right foot pressure ulcer.</p> <p>28 PA Code 211.5(a)(b)(f) Clinical Records</p>		