STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395168	A. Building B. Wing	05/21/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Yorkview Nursing and Rehabilitation	970 Colonial Avenue York, PA 17403

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)
F 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. Based on observation, clinical record review, staff interviews, and policy review, it was determined that the facility failed to treat each resident with respect and dignity and care in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality, for one of the five residents observed (Resident 5).Findings Include: Review of the facility's Dignity policy, dated August 2009, read, in part, Each resident shall be cared for in a manner that promotes and enhances quality of life, dignity, respect and individuality. The policy continued, Staff shall maintain an environment in which confidential clinical information is protected. Review of Resident 5's clinical record revealed an admission date of May 16, 2026. Review of Resident 5's interdisciplinary plan of care revealed diagnoses that included trauma related to PTSD (Post-Traumatic Stress Disorder - a serious mental health condition that can develop after an individual experiences or witnesses a traumatic event) and depression (Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest). An observation of Employee 5 (Social Worker) on May 18, 2026, at 10:33 AM, revealed interactions with Resident 5, including the Brief Assessment for Mental Status (BIMS -is designed to quickly assess cognitive function in elderly patients, particularly in long-term care or nursing home settings. It helps caregivers track memory and thinking changes over time and determine if additional support or further evaluation for dementia is needed), and an interview that included the PHQ-9 (a questionnaire that measures how often a person has been bothered by 9 symptoms of depression over the past two weeks). Resident 5 was questioned about her mood, appetite, concentration, feeling down, depressed, or hopeless, and her ability to recall and repeat words. An immediate interview with the Employee, at 10:34 AM, revealed she assessed Resident 5 in the hallway, in the presence of other residents, staff, and visitors, as Resident 5 had a recent fall and was not in her room. An interview with Employee 3 (Director of Social Services) on May 18, 2026, at 12:18 PM, confirmed that it is not best practice to interview residents in the hall regarding their cognitive and mood status. A final interview with the Nursing Home Administrator on May 18, 2026, at 12:43 PM, confirmed awareness of Employee 5's assessment of Resident 5 in the hall and that the assessment was not best practice. 28 Pa. Code 201.14 (a) Responsibility of licensee

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	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. Based on observations and staff interviews, it was determined that the facility failed to maintain a safe, clean, comfortable, and home-like interior for two rooms on two of nine units (Units B and C). Observation in Resident 7's room on May 18, 2026, at 10:17 AM, revealed the multiple slats on the blinds were broken off or bent, dried food was observed around and under the bed. Observation in Resident 8's room on May 18, 2026, at 10:45 AM, revealed the papers, used cups, dried liquid, red and brown and dried food particles ground into the floor, and the floor note to contain a hazy film. Interview with Nursing Home Administrator on May 18, 2026, at 2:40 PM, revealed that when blinds need to be replaced, a work order should be submitted, and that Resident 8 likes to keep food in his room. 28 Pa. Code 201.18 (e)(1)(2.1) Management

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0803 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	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. Based on facility documents, clinical record review, observations, and staff interviews, it was determined that the facility failed to provide a nutritionally adequate meal for one of one meal observed (May 18, 2026, lunch meal). Findings include: Review of the facility Long Term Care Diet Manual- Regular Diet, not dated, read, in part, regular diet is to receive 3 ounces of protein at lunch. Review of the production sheets (guidance for dietary staff regarding portion size and number of servings required for each menu item) documented to serve three chicken tenders. Observation on May 18, 2026, at 12:30 PM, during lunch meal service revealed residents were served two chicken tenders as the main entree. Interview with Employee 10 (Food Service Director), at 1:40 PM, revealed the serving for the main entree should be two chicken tenders. The surveyor asked for the portion of chicken to be weighed, and Employee 10 revealed a scale wasn't available to obtain the weight of the chicken. Review of the Diet Manual and production sheets with Employee 10, at 1:50 PM, he stated that three chicken tenders should've been served. Interview with the Nursing Home Administrator (NHA) on May 18, 2026, at 2:24 PM, it was revealed that the production sheet should be followed to ensure the appropriate size serving is provided. Review of Resident 6's clinical record documented diagnoses that included Alzheimer's disease (a progressive brain disorder affecting memory and the ability to carry out simple daily tasks) and dysphagia (difficulty swallowing). Review of resident 6's physician orders included mechanical soft (chopped texture) texture diet, start date June 4, 2025. During the lunch meal service on May 18, 2026, at 12:09 PM, Resident 6 was served carrots, ground chicken tenders, pudding, ice cream, juice; however, she wasn't served her peanut butter and jelly sandwich or extra gravy or sauce per her meal ticket. At that time interview with Employee 11 (Nursing Assistant) confirmed Resident 6 should've received a peanut butter and jelly sandwich and extra gravy or sauce. Observation and interview on May 18, 2026, at 12:15 PM, with Employee 10 (Food Service Director) it was confirmed that Resident 6 should've received a peanut butter and jelly sandwich and extra gravy. Interview with the NHA on May 18, 2026, at 2:24 PM, it was revealed that Resident 6 should've been served items per the tray ticket. Pa code 211.6 - Dietary Services

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F 0804 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of select grievances, observation, staff interview, and completion of one meal test tray, it was determined that the facility failed to provide foods that are palatable, attractive, and at appetizing temperatures at one of one meal observed.Findings include: Review of grievance submitted on April 30, 2026, on behalf of Resident 6, documented milk on top of the food cart for two hours not in ice, and family was concerned that milk would be reused. Resolution documented that milk should've been on ice and staff were educated. Review of facility provided Test tray evaluation form, not dated, read, in part, hot entree, starch and vegetable should be greater than 135 degrees Fahrenheit (F), cold entree less than 41 degrees F, and dessert less than 41 degrees or greater than 135 degrees F. Observation on May 18, 2026, at 9:26 AM, revealed the breakfast cart was delivered to C unit and the milk on top of the food cart was not on ice. A test tray was completed on May 18, 2026. Employee 10 (Food Service Director) took temperatures of the food items at the time the test tray was served for evaluation (11:35 AM). The following were the recorded highest temperatures: Chicken tenders 102 [NAME] fries 97 FColeslaw 66 F Fruit cocktail 74 F- was served at room temperatureMilk 60 F Interview with Employee 10 on May 18, 2026, at 1:20 PM, revealed the temperatures of all items were not as they should be, the hot items should've been warmer and the cold items cooler. Interview with Nursing Home Administrator on May 18, 2026, at 2:40 PM, stated that the temperatures should be within an acceptable temperature range. 28 Pa. Code 201.14.(a) Responsibility of licensee28 Pa code 211.6 - Dietary Services