

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395172	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/09/2024
NAME OF PROVIDER OR SUPPLIER Manor at Penn Village, The		STREET ADDRESS, CITY, STATE, ZIP CODE 51 Route 204 Selinsgrove, PA 17870	

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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 20725</p> <p>Based on clinical record review and staff interview, it was determined that the facility failed to provide the highest practicable care regarding physician ordered medications and treatments for four of four residents reviewed (Residents 1, 2, 3, and 4).</p> <p>Findings include:</p> <p>Clinical record review for Resident 1 revealed active physician orders for staff to administer the following:</p> <p>Levothyroxine Sodium (medication used to treat an underactive thyroid, hypothyroidism) 125 mcg (micrograms) via G-tube (tube inserted through the abdominal skin into the stomach for the purpose of instilling nutrition, fluids, and/or medications) in the morning</p> <p>Omeprazole (medication used to treat certain stomach problems such as acid reflux or ulcers) 20 mg (milligrams) via G-tube daily</p> <p>Famotidine (medication used to treat ulcers of the stomach and intestines) 20 mg via G-tube twice daily</p> <p>Petroleum jelly (topical ointment for moisturization) external ointment to lips twice a day</p> <p>Check enteral (involving or passing through the intestine, either naturally via the mouth and esophagus, or through an artificial opening) residual every shift and notify the physician if greater than 60 milliliters</p> <p>Change Ziploc bag daily for storage of [NAME] extension tube (G-tube extension piece) every night shift</p> <p>Apply anti-fungal treatment (an antifungal medication, also known as an antimycotic medication, used to treat and prevent mycosis such as athlete's foot, ringworm, or thrush) to left lower extremity itchy, red patches twice daily</p> <p>Hydrocortisone (man-made steroid used to decrease the immune system's response to various diseases) cream to abdomen every day and evening shift</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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Sodium Fluoride (used to prevent tooth decay) 1.1 percent cream twice daily as toothpaste every morning and bedtime</p> <p>Colostomy (surgically created opening for the colon, or large intestine, through the abdomen) and Stoma (opening created via colostomy surgery) care every shift</p> <p>Stoma powder to ostomy (surgically created stoma) with every ostomy wafer change</p> <p>Clean ostomy site with soap and water, apply skin prep (a liquid applied to the skin to form a protective film or barrier) around ostomy site, apply hydrogel (material that can absorb relatively large amounts of fluid; high water content, soft structure, and porosity closely resemble living tissues) to MASD (Moisture Associated Skin Damage, skin breakdown) to the left of the ostomy site and place Optifoam (foam wound dressings that help create an ideal healing environment), wafer (colostomy wafer, a plastic ring that adheres to the skin around the stoma used to connect the pouch system and the skin barrier designed to protect delicate stomal skin from caustic output), and ostomy (collection) bag twice weekly every Monday and Friday</p> <p>Review of Resident 1's MAR (Medication Administration Record, an electronic method to document the administration of medications) and TAR (Treatment Administration Record, an electronic method to document the administration of treatments) dated March and April 2024 revealed that staff failed to document the completion of the following:</p> <p>Levothyroxine Sodium 125 mcg on March 22, 2024, at 5:00 AM</p> <p>Omeprazole 20 mg on April 1, 2024, at 9:00 AM</p> <p>Famotidine 20 mg on April 1, 2024, at 9:00 AM</p> <p>Petroleum jelly external ointment to lips on April 1, 2024, at 9:00 AM</p> <p>Enteral residual check (notify the physician if greater than 60 milliliters) on March 18, 2024, day shift</p> <p>Change Ziploc bag for storage of [NAME] extension tube on March 23, 2024</p> <p>Anti-fungal treatment to left lower extremity patches March 27, 2024, day shift, and April 1, 2024, day shift</p> <p>Hydrocortisone cream to abdomen on March 27, 2024, day shift</p> <p>Sodium Fluoride cream as toothpaste on March 27, 2024, day shift</p> <p>Colostomy and Stoma care on March 27, 2024, day shift</p> <p>Stoma powder to ostomy with ostomy wafer change on March 27, 2024, day shift</p> <p>Ostomy cleansing, skin prep, hydrogel to MASD, Optifoam, wafer, and ostomy bag on Monday, April 1, 2024</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Clinical record review for Resident 2 revealed physician orders for staff to administer the following:</p> <p>PICC (A PICC line is a long, flexible tube that is inserted into a vein in your upper arm and threaded to a central vein near the heart to deliver fluids and/or medications for a longer period of time) or Midline (A midline catheter is a small tube inserted into a vein in your arm to give treatments; the end of a midline, inside your body, does not go past the top of your armpit) measure upper arm circumference and external catheter length on admission, with each dressing change, and as needed every dayshift on Friday</p> <p>Change (PICC or Midline) dressing on admission or 24 hours after insertion and weekly thereafter and as needed every Friday dayshift</p> <p>Vancomycin (antibiotic) HCL intravenous solution, 1500 mg two times daily</p> <p>Gabapentin (medication used to treat seizures or nerve pain) 200 mg three times a day</p> <p>Flush PICC or Midline with 10 milliliters of normal saline every shift</p> <p>Remove knee high TED (thromboembolism-deterrent, T.E.D, compression stockings are socks worn to provide support to the lymphatic drainage and veins of the lower extremities) stockings in the evening</p> <p>Review of Resident 2's MAR and TAR dated March and April 2024 revealed that staff failed to document the completion of the following:</p> <p>PICC or Midline, measure upper arm circumference and external catheter length on admission, with each dressing change and as needed every dayshift on Friday, March 15, 2024, and April 5, 2024</p> <p>Change (PICC or Midline) dressing on admission or 24 hours after insertion and weekly thereafter every Friday on Friday, March 15, 2024, and April 5, 2024</p> <p>Vancomycin HCL intravenous solution, 1500 mg on:</p> <p>March 11, 2024, at 8:00 AM</p> <p>March 12, 2024, at 8:00 PM</p> <p>March 17, 2024, at 8:00 PM</p> <p>March 18, 2024, at 8:00 AM,</p> <p>March 20, 2024, at 8:00 AM and 8:00 PM</p> <p>March 21, 2024, at 8:00 PM</p> <p>March 26, 2024, at 8:00 PM</p> <p>March 27, 2024, at 8:00 AM</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>March 28, 2024, at 8:00 AM and 8:00 PM</p> <p>April 3, 2024, at 8:00 PM</p> <p>April 7, 2024, at 8:00 PM</p> <p>Gabapentin 200 mg on March 15, 2024, at 12:00 PM</p> <p>Flush PICC or Midline with 10 milliliters of normal saline every shift on:</p> <p>March 11, 2024, day shift</p> <p>March 12, 2024, evening, and night shifts</p> <p>March 14, 2024, day shift</p> <p>March 15, 2024, day shift</p> <p>March 17, 2024, evening shift</p> <p>March 18, 2024, day shift</p> <p>March 19, 2024, night shift</p> <p>March 20, 2024, day shift, and evening shift</p> <p>March 21, 2024, evening shift</p> <p>March 26, 2024, evening shift</p> <p>March 27, 2024, day shift</p> <p>March 28, 2024, day shift, evening, and night shifts</p> <p>March 31, 2024, night shift</p> <p>April 3, 2024, evening shift</p> <p>April 5, 2024, night shift</p> <p>April 6, 2024, night shift</p> <p>April 7, 2024, evening shift</p> <p>Remove knee high TED stockings in the evening on March 15, 2024, and March 22, 2024</p> <p>Clinical record review for Resident 3 revealed physician orders for staff to administer the following:</p> <p>(continued on next page)</p>

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Change (oxygen) tubing, mask, and/or nasal cannula (thin tubing with prongs on one end used in the nose to administer supplemental oxygen) weekly every Saturday night</p> <p>Flush foley (tubing inserted through the penis and into the bladder to drain urine) with 60 milliliters of normal sterile saline every day and evening shift</p> <p>Zinc Oxide (topical treatment used to treat diaper rash, minor burns, severely chapped skin, or other minor skin irritations) cream to groin and abdominal folds every day and evening shift</p> <p>Zinc Oxide cream to sacrum and buttocks every shift</p> <p>Betadine (an antiseptic used for skin disinfection) swab to open area on penis every shift and as needed</p> <p>Review of Resident 3's MAR and TAR dated March and April 2024 revealed that staff failed to document the completion of the following:</p> <p>Tubing, mask, and/or nasal cannula change Saturday, March 23, 2024, night shift</p> <p>Foley flush with 60 milliliters of normal sterile saline on:</p> <p>March 1, 2024, evening shift</p> <p>March 4, 2024, evening shift</p> <p>March 6, 2024, evening shift</p> <p>March 14, 2024, day shift</p> <p>March 15, 2024, evening shift</p> <p>Zinc Oxide cream to groin and abdominal folds on:</p> <p>March 1, 2024, evening shift</p> <p>March 4, 2024, evening shift</p> <p>March 6, 2024, evening shift</p> <p>March 14, 2024, day shift</p> <p>March 15, 2024, evening shift</p> <p>March 22, 2024, evening shift</p> <p>March 28, 2024, day shift</p> <p>April 1, 2024, evening shift</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Zinc Oxide cream to sacrum and buttocks every shift on:</p> <p>March 1, 2024, evening shift</p> <p>March 4, 2024, evening shift</p> <p>March 6, 2024, evening shift</p> <p>March 14, 2024, day shift</p> <p>March 15, 2024, evening shift</p> <p>March 22, 2024, evening shift</p> <p>March 28, 2024, day shift</p> <p>April 1, 2024, evening shift</p> <p>Betadine swab to open area on penis on:</p> <p>March 1, 2024, evening shift</p> <p>March 4, 2024, evening shift</p> <p>March 6, 2024, evening shift</p> <p>March 14, 2024, day shift</p> <p>March 15, 2024, evening shift</p> <p>March 22, 2024, evening shift</p> <p>March 23, 2024, evening, and night shifts</p> <p>Clinical record review for Resident 4 revealed physician orders for staff to administer the following:</p> <p>Circulation checks to RUE (right upper extremity, arm) every shift</p> <p>Hipsters (padded material worn as pants under clothing to cushion hip joints) every shift</p> <p>Wanderguard (a wireless system that alerts caregivers when a resident with a wearable pendant approaches a programmed door or area) check function and placement every shift</p> <p>Biofreeze (a topical analgesic used to relieve minor to moderate joint or muscle discomfort) external gel to left rib/flank four times a day</p> <p>(continued on next page)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 20725</p> <p>Based on review of select facility policies and procedures, clinical record review, and resident and staff interview, it was determined that the facility failed to implement necessary treatment and services to promote pressure ulcer healing, prevent pressure ulcer worsening, and prevent new ulcers from developing for two of two residents reviewed for pressure ulcer concerns (Residents 1 and 2).</p> <p>Findings include:</p> <p>The facility policy entitled, Skin and Wound, last reviewed without changes on January 4, 2023, indicated that the facility's policy is to provide a system for identifying risk and implementing resident-centered interventions to promote skin health, prevention, and healing of pressure injuries. The process includes that resident's skin is evaluated upon admission/re-admission and documented in the medical record. The nurse is to complete skin evaluations weekly and document in the medical record. Pressure Injury Mitigation Strategies include developing resident-centered interventions based on resident risk factors. Skin Impairment Identification includes: Document presence of skin impairment(s)/new skin impairment(s) when observed and weekly until resolved; nurse to report changes in skin integrity to the physician/physician extender, resident/resident representative, and document in the medical record; develop resident centered interventions; refer to therapy as appropriate; monitor resident's response to treatment and modify as indicated. On-going evaluation includes to evaluate the effectiveness of interventions, and progress towards goals, during the standard of care and the care plan meetings.</p> <p>Clinical record review for Resident 1 revealed wound consultant documentation dated March 5, 2024, that indicated the presence of a Stage III pressure ulcer (wounds that affect the top two layers of skin as well as fatty tissue) of the left lower buttock that was 3 cm (centimeters) by 2.5 cm by an unmeasurable depth due to the presence of tissue overgrowth.</p> <p>Wound consultant documentation dated March 12, 2024, indicated that Resident 1 continued with the Stage III pressure ulcer of the left lower buttock; and developed a new Stage III pressure ulcer on her sacrum (tailbone)measuring 1.2 cm by 2 cm by 0.1 cm. The plan of care included an upgrade to an offloading chair cushion (pressure is loaded onto a greater surface area through the built-in contours of a cushion that help align and stabilize the spine, pelvis, and lower extremities) as well as wound treatment with alginate calcium with silver (calcium alginate with silver is a type of wound dressing that contains silver alginate that inhibits the growth of microorganisms, absorbs a lot of bacteria and fluid from the wound, and transforms into a soft, cohesive gel when moistened) every day to both the left lower buttock and sacral wounds.</p> <p>Nursing documentation dated March 12, 2024, at 3:23 PM indicated that the registered nurse called the facility's durable medical equipment provider regarding Resident 1's wheelchair seat cushion. The provider indicated that there were issues with payment. The writer indicated that the issue was referred to the Director of Nursing (DON) to call the durable medical equipment provider to assist with the issue. The writer stipulated that the DON later stated that she took care of issue, and a new cushion should be available in 7-10 days.</p> <p>(continued on next page)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Nursing documentation dated March 13, 2024, at 12:34 PM by the same registered nurse indicated that the physician's assistant ordered a custom cushion for Resident 1's wheelchair; and that a therapy screen for the cushion was discussed. The documentation indicated that administration staff was involved in getting the cushion from the durable medical equipment provider in seven to 10 days.</p> <p>A physician's order dated March 13, 2024, indicated the implementation of a custom cushion for Resident 1's wheelchair due to the sacral wound.</p> <p>Nursing documentation by the Regional Director of Clinical Services dated March 15, 2024, at 4:01 PM indicated that Resident 1's responsible party was made aware of new orders for a new wheelchair cushion.</p> <p>Resident 1's clinical record did not contain evidence (e.g., nursing, or skilled therapy progress note documentation) that Resident 1 received a new, custom, wheelchair cushion.</p> <p>Wound consultant documentation dated March 19, 2024, March 26, 2024, and April 2, 2024, continued to indicate that the plan of care included an upgrade to an offloading chair cushion as well as wound treatment with alginate calcium with silver every day to both the left lower buttock and sacral wounds.</p> <p>Review of Resident 1's TAR (treatment administration record, electronic documentation of the provision of care) dated March and April 2024 revealed that staff failed to document daily wound treatment to Resident 1's sacrum and buttock on the following dates:</p> <p>March 17, 23, and 27, 2024</p> <p>April 1, 2024</p> <p>The wound consultant documentation dated April 2, 2024, indicated that Resident 1's left lower buttock wound progress was not at goal and had increased in surface area from the previous assessment of 7 cm to 7.5 cm.</p> <p>Interview with the Nursing Home Administrator on April 8, 2024, at 3:00 PM and 8:30 PM; and electronic communication dated April 9, 2024, at 12:45 PM and 1:53 PM, revealed that the facility had no documentation from the facility's durable medical equipment provider that a new cushion was delivered for Resident 1 following the March 12, 2024, wound consultant provider recommendation.</p> <p>Clinical record review for Resident 2 revealed that the facility admitted him on March 8, 2024, with diagnoses that included extradural and subdural abscess (unspecified infection within the brain or spinal cord), intraspinal (within the spine) abscess and granuloma (tiny lump of immune cells formed when the body tries to fight infection or inflammation), unspecified cord compression, sepsis (blood infection) due to MRSA (methicillin-resistant Staphylococcus aureus, a type of bacteria that is resistant to several antibiotics), abscess of lung without pneumonia, cutaneous (skin) abscess of back (except buttock), acute and subacute infective endocarditis (inflammation of the inner lining of the heart).</p> <p>(continued on next page)</p>		

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<p>F 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Interview with Resident 2 on April 8, 2024, at 11:36 AM revealed that he had been at the facility for approximately one month; and that he had a large wound on his back. Resident 2 used his cellphone to show the surveyor a picture of a pressure ulcer in the area of a coccyx that he claimed was taken of him on April 6, 2024. Resident 2 described it as, a huge sore, and indicated that he believed that it had gotten larger. Resident 2 stated that the sore on his bottom had gotten, really, really, bad.</p> <p>Clinical record review of an admission Braden assessment (standardized tool to assess the risk for developing a pressure ulcer) indicated Resident 2 was at a high risk (score of 11) on March 8, 2024.</p> <p>The Admission/Readmission Data Collection assessment on March 8, 2024, included the identification of a wound on Resident 2's sacrum (number 53 on the diagram), described as, above sacrum, Stage II (sore has broken through the top and part of the second layer of skin), 3.6 cm by 1.1 cm by 0.2 cm; wound bed with pink epithelial (thin, packed, layer of cells typically deemed healthy) tissue; edges regular and periwound blanches.</p> <p>Admission physician orders for Resident 2 dated March 9 to 11, 2024, included instructions for staff to apply a Duoderm (hydrocolloid products for light to moderately draining wounds; they form a moist wound healing environment, absorb drainage, and provide wound protection) to the Stage II wound above his sacrum; change every three days and as needed. A physician's order effective March 11 to 19, 2024, instructed staff to continue the Duoderm to Resident 2's Stage II wound located above his sacrum; change every three days and as needed on day shift.</p> <p>There was no evidence in Resident 2's medical record that staff assessed Resident 2's sacral wound after March 8, 2024, to evaluate Resident 2's response to the Duoderm treatment.</p> <p>Nursing documentation dated March 19, 2024, at 3:32 PM (11 days after Resident 2's admission) indicated that a wound doctor was in to see Resident 2 and changed the wound care instructions.</p> <p>Progress note documentation by the facility's consulting wound care provider dated March 19, 2024, noted that Resident 2 presented with wounds on his sacrum and his right buttock. The documentation indicated that the sacral wound was unstageable (due to necrosis, unhealthy tissue), full thickness, 9 cm by 13 cm by a depth that was not measurable due to the presence of nonviable tissue and necrosis; 70 percent black necrotic tissue (eschar). The documentation indicated the presence of a Stage II pressure wound on his right buttock, partial thickness, 1 cm by 1.5 cm by a depth not measurable due to tissue overgrowth. The plan was to apply house barrier cream daily to the Stage II wound; and change the treatment to the sacral wound to fill the wound with betadine (liquid antiseptic used to treat or prevent skin infection) saturated gauze and a thin hydrocolloid sheet dressing and ABD pad (thick, cushioned, dressing) daily.</p> <p>Resident 2's clinical record contained no evidence that staff assessed his sacral wound between his admitted [DATE], and the consulting wound care provider documentation of March 19, 2024, to evaluate the effectiveness of the interventions or intervene timely as Resident 2's skin condition worsened. Resident 2's sacral wound worsened in size and appearance; and Resident 2 developed a second pressure ulcer, between March 8, 2024, and March 19, 2024.</p> <p>The surveyor reviewed the above concerns regarding Resident 2 during an interview with the Nursing Home Administrator and the Director of Nursing on April 8, 2024, at 8:30 PM.</p> <p>(continued on next page)</p>		

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F 0686 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	483.25(b)(1)(i)(ii) Treatment/svcs to Prevent/heal Pressure Ulcer Previously cited deficiency 1/26/24 28 Pa. Code 211.12(d)(1)(3)(5) Nursing services

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NAME OF PROVIDER OR SUPPLIER Manor at Penn Village, The		STREET ADDRESS, CITY, STATE, ZIP CODE 51 Route 204 Selinsgrove, PA 17870	

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p>20725</p> <p>Based on review of select facility policies and procedures, clinical record review, and staff interview, it was determined that the facility failed to implement interventions to maintain acceptable parameters of nutritional status for two of two residents reviewed for weight loss concerns (Residents 1 and 4).</p> <p>Findings include:</p> <p>The facility policy entitled, Best Practice Weight Change, last reviewed without changes on January 4, 2023, revealed that an identified weight change (gain or loss) is 2.5 percent in one week, five percent in one month, or 10 percent in three months. The document listed interventions that included a referral to the registered dietitian for a nutritional review and to update food preferences.</p> <p>Clinical record review for Resident 1 revealed diagnoses that included cerebral palsy (group of disorders of the brain that affects movement and posture) and dysphagia (difficulty swallowing food or liquid).</p> <p>Resident 1's physician orders indicated that Resident 1 was to have nothing by mouth since August 22, 2022.</p> <p>A physician's order dated January 25, 2024, instructed staff to obtain weekly weight assessments every Monday and Thursday.</p> <p>Review of Resident 1's weight assessment record revealed that staff failed to obtain a weight assessment on the following dates:</p> <p>Thursday, February 1, 2024</p> <p>Monday, February 5, 2024</p> <p>Thursday, February 15, 2024</p> <p>Monday, February 19, 2024</p> <p>Thursday, February 22, 2024</p> <p>Thursday, March 7, 2024</p> <p>Monday, March 11, 2024</p> <p>Monday, March 18, 2024</p> <p>Thursday, March 21, 2024</p> <p>(continued on next page)</p>

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A physician's order active from January 2, 2024, to February 19, 2024, instructed staff to give 237 milliliters of Jevity 1.2 (liquid nutrition) bolus feeding via a syringe five times a day due to Resident 1's dysphagia diagnosis.</p> <p>A physician's order active from February 19 to 27, 2024, instructed staff to give 237 ml of Jevity 1.2 bolus feeding via a syringe four times a day.</p> <p>The current physician's order starting February 27, 2024, instructed staff to continue to give 237 milliliters of Jevity 1.2 bolus feeding via a syringe four times daily.</p> <p>Review of Resident 1's treatment administration record (TAR, electronic documentation of the administration of physician ordered treatments) dated February, March, and April 2024 revealed that no staff documented the provision of Resident 1's bolus feeding on the following dates and times:</p> <p>February 13, 2024, at 8:00 PM</p> <p>March 9, 2024, 1:00 PM</p> <p>March 17, 2024, at 9:00 AM and 1:00 PM</p> <p>April 1, 2024, at 9:00 AM</p> <p>Review of Resident 1's weight assessment record revealed that her weight assessments fluctuated from 71.5 pounds to 67 pounds from February 3, 2024, through April 1, 2024.</p> <p>Clinical record review for Resident 4 revealed the following weight assessments:</p> <p>January 5, 2024, at 12:00 PM, 171.9 pounds</p> <p>February 5, 2024, at 11:10 AM, 165.8 pounds</p> <p>February 7, 2024, at 11:45 AM, 154.7 pounds (a 17.2-pound, 10 percent severe weight loss in one month)</p> <p>February 19, 2024, at 1:42 PM, 152.8 pounds</p> <p>February 26, 2024, at 1:55 PM, 146.8 pounds (a 7.9-pound, 5.10 percent additional weight loss since February 7, 2024)</p> <p>February 28, 2024, at 10:13 PM, 130.0 pounds (a 16.8-pound, 11.44 percent weight loss since the weight assessment two days prior; a 24.7-pound, 15.96 percent severe weight loss within one month; a 41.9-pound, 24.37 percent severe weight loss in two months)</p> <p>March 4, 2024, at 10:58 AM, 130.0 pounds</p> <p>(continued on next page)</p>

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<p>F 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>A Standards of Care Note dated February 15, 2024, at 1:40 PM indicated that the registered nurse Regional Director of Clinical Services noted Resident 4's weight loss as five percent in 30 days and 10 percent in 180 days. The documentation indicated that the writer would suggest Med Pass 2.0 (liquid nutritional supplement) three times a day and weekly weight assessments as well as an update to Resident 4's preferences.</p> <p>The documentation by the registered nurse Regional Director of Clinical Services did not identify that the weight assessment on February 7, 2024, reflected a 10 percent loss in one month. There was no indication that a registered dietitian or nutritional staff responded to Resident 4's severe weight loss at that time. Resident 4's clinical record did not contain evidence of an assessment of food preferences.</p> <p>A physician's order dated February 18, 2024 (three days later) instructed staff to supply 60 milliliters of Med Pass (nutritional supplement) two times a day (not three times a day as suggested by the February 15, 2024, documentation).</p> <p>Resident 4's clinical record did not contain evidence that nutritional, or nursing staff evaluated Resident 4's response to the nutritional interventions between February 18, 2024, and February 26, 2024; or responded to the additional weight loss identified on February 26, 2024.</p> <p>There was no evidence that staff obtained a re-weight assessment to determine the validity of Resident 4's severe weight loss in the two days from February 26 to 28, 2024. Resident 1's clinical record contained no evidence of a nursing or dietary staff response to the February 26 or 28, 2024, severe weight loss assessments until March 4, 2024.</p> <p>Dietary documentation dated March 4, 2024, at 8:51 PM indicated that a registered dietitian assessed Resident 4's weight loss of 11.44 percent in one week. The documentation indicated that the plan would be to increase the Med Pass supplement to four times a day and add a house supplement with meals. The documentation indicated an assessment of the calories and protein provided by the Med Pass supplement four times a day.</p> <p>Resident 4's most recent weight assessment available at the time of the onsite survey, dated April 1, 2024, revealed that Resident 4 was 136 pounds (a six-pound gain in one month) since the implementation of the March 4, 2024, recommendations.</p> <p>The facility failed to thoroughly assess Resident 4's severe weight loss, implement interventions timely, and assess Resident 4's response to implemented interventions to maintain acceptable parameters of nutrition.</p> <p>The surveyor reviewed the concerns regarding the omitted weight assessments and gastrostomy feedings for Resident 1 during an interview with the Nursing Home Administrator and the Director of Nursing on April 8, 2024, at 8:30 PM.</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing services</p>		

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>20725</p> <p>Based on observation and staff interview, it was determined that the facility failed to ensure security of medications and biologicals on one of four nursing units (Unit C, second floor, Resident 6).</p> <p>Findings include:</p> <p>Observation of the second-floor nursing unit on April 8, 2024, at 4:55 PM revealed the door to the medication prep room was open. The cabinet doors were visibly open from the doorway and noted to contain numerous over-the-counter medications such as:</p> <p>Acetaminophen (Tylenol), analgesic</p> <p>Multivitamin nutritional supplement</p> <p>Hydrogen peroxide (liquid antiseptic)</p> <p>Low dose aspirin, 81 milligrams (analgesic used to reduce risk of heart attacks)</p> <p>Milk of Magnesia (liquid laxative)</p> <p>FeSO4 (iron nutritional supplement)</p> <p>The room also contained two unlocked treatment carts that contained numerous creams, lotions, and medicated treatments such as:</p> <p>Diclofenac Sodium (medication used to treat swelling/inflammation)</p> <p>Premarin vaginal cream (estrogen hormone medication)</p> <p>Nystatin topical powder (antifungal medication)</p> <p>Fluocinolone acetonide topical solution (steroid topical skin treatment used to reduce inflammation and itching)</p> <p>Boxes of nicotine patches (topical patches containing the addictive substance found in tobacco)</p> <p>Tube of dermasyn hydrogel wound dressing (hydrogel wound dressing that is enriched with Vitamin E that provides a moist, healthy, wound environment)</p> <p>While observing the medication prep room on April 8, 2024, at 5:00 PM Resident 6, propelled her wheelchair to the doorway to request ice. Resident 6 stated that the nurse was on the other hallway, which was not visible to the surveyor.</p> <p>(continued on next page)</p>		

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview with Employee 1 (licensed practical nurse) on April 8, 2024, at 5:01 PM revealed that the door to the medication prep room was open because maintenance staff were installing a padlock on the refrigerator in that room. Employee 1 stated that maintenance staff were alone in the medication prep room because she needed to complete her medication pass.</p> <p>483.45(g)(h)(1)(2) Label/store Drugs and Biologicals</p> <p>Previously cited deficiency 1/26/24</p> <p>28 Pa. Code 211.9(k) Pharmacy services</p> <p>28 Pa. Code 211.12(c)(d)(1)(3) Nursing services</p>		

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<p>F 0800</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide each resident with a nourishing, palatable, well-balanced diet that meets his or her daily nutritional and special dietary needs.</p> <p>20725</p> <p>Based on review of select facility policies and procedures, staff and resident interview, and observation, it was determined that the facility failed to provide residents with palatable food on two of four nursing units (Unit C, second floor, Residents 2 and 3; Unit F, third floor, Resident 5).</p> <p>Findings include:</p> <p>The facility policy entitled, Food: Quality and Palatability, last reviewed without changes on January 4, 2023, revealed that food will be prepared by methods that conserve nutritive value, flavor, and appearance. Food will be palatable, attractive, and served at a safe and appetizing temperature. The policy did not indicate any temperatures used as a guide to ensure the food delivered to the residents met an expected palatable temperature.</p> <p>Interview with Resident 2 who resided on the second-floor nursing unit on April 8, 2024, at 11:36 AM revealed that he thought that the food was, .not that great, most of the time cold.</p> <p>Interview with Resident 3 who resided on the second-floor nursing unit on April 8, 2024, at 5:41 PM revealed that he requested the nurse aide call the kitchen for peanut butter and jelly sandwiches because the pork chop that was delivered for his evening meal was too tough for him to eat.</p> <p>Observation of the Unit F, third floor, nursing unit on April 8, 2024, at 6:15 PM revealed the facility's last food cart arrived on the unit.</p> <p>Observation of Resident 5 in the third-floor nursing unit dining area on April 8, 2024, at 6:23 PM revealed staff delivered his meal tray to him, and he began to eat. Resident 5 stated that the carrots were, barely warm.</p> <p>Staff delivered meal trays from the meal cart on April 8, 2024, at 6:15 PM, until the last resident tray was delivered at 6:40 PM.</p> <p>Observation of a test meal tray on April 8, 2024, at 6:40 PM with Employee 2 (nurse aide) revealed the following findings:</p> <p>Pork chop, lukewarm, at 122.9 degrees Fahrenheit</p> <p>White rice, lukewarm, at 115.6 degrees Fahrenheit</p> <p>Carrots, lukewarm, at 109.8 degrees Fahrenheit</p> <p>Interview with the Nursing Home Administrator and the Director of Nursing on April 8, 2024, at 8:30 PM confirmed that the facility had no policy or procedure that stipulated an expectation of food temperatures at the point of service (to the resident) to ensure palatable meals for residents.</p> <p>28 Pa. Code 201.14(a) Responsibility of licensee</p> <p>(continued on next page)</p>		

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F 0800 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	28 Pa. Code 201.18(b)(3)(d)(e)(2)(3) Management