

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395173	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/07/2024
NAME OF PROVIDER OR SUPPLIER Westgate Hills Rehabilitation and Nursing Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE 2050 Old West Chester Pike Havertown, PA 19083	

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 - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>50032</p> <p>Based on review of facility policies and clinical records, as well as staff interviews, it was determined that the facility failed to ensure that physician's orders for medications were followed for one of twenty-two residents reviewed (Resident 28).</p> <p>Findings include:</p> <p>Review of facility's policy regarding medication administration, revealed that medications are administered as prescribed in accordance with good nursing principles and only by persons legally authorized to do so. Right resident, right drug, right dose, right route, and right time are applied for each medication being administered. Medications are administered in accordance with written orders of the prescriber.</p> <p>Review of Resident 28's quarterly Minimum Data Set (MDS) assessment (mandated assessment of a resident's abilities and care needs) dated August 31, 2024, indicated that the resident was cognitively intact, required assistance from staff for her daily care needs, and had diagnoses that included Chronic Systolic (Congestive) Heart Failure (long-term condition that happens when your heart can't pump blood well enough to give your body a normal supply), and Paroxysmal Atrial Fibrillation (irregular heartbeat).</p> <p>Review of Resident 28's Physician orders, dated July 26, 2024, included an order for the resident to receive 50 milligrams (mg) of Metoprolol Succinate Extended Release ER (blood pressure medication) every 12 hours for hypertension, and to hold the medication if the resident's systolic blood pressure (top number of a blood pressure reading) was below 105 millimeters of mercury (mmHg) OR heartrate is less than 60 beats per minute.</p> <p>Review of Resident 28's Medication Administration Record (MAR) for the month of October 2024 indicated that Metoprolol was administered twenty-three (23) times between dates of October 1, through October 31, 2024, when the resident's heartrate was less than 60 beats per minute.</p> <p>Interview with the Director of Nursing and the Nursing Home Administrator on November 07, 2024, at 12:10 p.m. confirmed that staff did not follow the physician-ordered parameters for Resident 28's Metoprolol on the above dates and times.</p> <p>28 Pa. Code 211.12(d)(1)(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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<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>41765</p> <p>Based on review of facility's policy, clinical records review, and staff interview, it was determined that the facility failed to timely and appropriately address a significant weight change for one of 22 residents reviewed (Resident 93).</p> <p>Findings include:</p> <p>Review of the facility policy titled Weight Policy, dated August 29, 2023, revealed that all weights are to be documented in the electronic medical record. Weight variances will be reviewed by the dietician and the Interdisciplinary team (IDT). Confirmed re-weights will be documented in the electronic medical records. The dietician will reassess the nutritional needs and intakes of any resident with a significant weight change. Interventions will be evaluated and documented. The resident's physician and responsible party will be notified of any significant weight changes.</p> <p>Review of Resident 93's clinical records revealed resident was receiving a continuous enteral feeding via gastrostomy tube (GT- tube inserted through the abdominal wall used to give drugs and liquid food to the patient) at 1560 ml., for total calories of 1872 kcal.</p> <p>Review of Resident 93's weights and vitals revealed a baseline weight of 130 pounds on September 20, 2024, and 120.2 pounds on October 16, 2024, a 9.8 pounds (7.54%) significant weight loss in less than a month.</p> <p>Review of Resident 93's clinical records failed to reveal that the resident was reweighed when a significant weight change was identified on October 16, 2024.</p> <p>Review of Resident 93's clinical records revealed Resident 93's significant weight change was not addressed by the dietitian until October 23, 2024, seven days after significant weight loss was identified on October 16, 2024.</p> <p>Review of Resident 93's Dietitian's progress notes dated October 23, 2023 at 1:14 p.m., revealed current BMI (Body Mass Index- value derived from the mass and height of a person) 16.8, is underweight. The dietitian also documented This weight loss is a clinically significant change, therefore recommend MD/RP notification per policy. Etiology for weight loss is unclear.</p> <p>Review of Resident 93's nursing progress documented on November 1, 2024, revealed physician was notified of the weight loss, two week after significant weight change was identified on October 16, 2024.</p> <p>Interview with the Director of Nursing (DON) was conducted on November 7, 2024. The DON reported that re-weight is done right after weight change was identified. The DON reported that nursing is responsible for notifying the physician of a significant weight changes. The DON reported that the dietitian informed her/him of the weight loss on October 30, 2024.</p> <p>The above information was conveyed with the Nursing Home Administrator on November 7, 2024, at 11:30 a. m.</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>The facility failed to ensure Resident 93's significant weight change was timely and appropriately addressed and physician was timely notified.</p> <p>28 Pa. Code 201.18(b)(1) Management</p> <p>28 Pa. Code 211.5(f) Clinical records</p> <p>28 Pa. 211.12(c)(d)(1)(3)(5) Nursing services</p>		

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<p>F 0756</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41765</p> <p>Based upon clinical record review, it was determined that the facility failed to ensure that medication irregularities were acted upon by a physician for one of five residents reviewed (Resident 67).</p> <p>Findings include:</p> <p>Review of Resident 67's clinical record revealed Resident 67 was admitted to the facility on [DATE].</p> <p>Review of Resident 67's clinical record revealed Resident 67 currently has a BIMS (Brief Interview of Mental Status) score of 5, indicating severely impaired cognition.</p> <p>Review of Resident 67's clinical record reveal medical diagnoses of Restlessness and Agitation, Unspecified Dementia (loss of memory, language and other thinking abilities that interfere with daily life) with Behavioral Disturbance, Cognitive Communication Deficit, Alzheimer's Disease, Unspecified Protein Calorie Malnutrition, and Nutritional Deficiency.</p> <p>Review of Resident 67's clinical records revealed a physician order dated May 25, 2024, for Mirtazapine oral tablet 7.5 mg. for appetite.</p> <p>Review of Resident 67's clinical records revealed a physician order dated August 13, 2024, for Lorazepam oral tablet 2 mg/ml. for Anxiety.</p> <p>Further review of Resident 67's clinical records revealed a physician order dated August 13, 2024, for Quetiapine Fumarate oral tablet 25 mg. for Insomnia.</p> <p>Review of Resident 67's clinical record revealed a MRR (Medication Record Review) was completed on July 10, 2024, with the recommendation, Please evaluate Mirtazapine use for Appetite without a Depression diagnoses.</p> <p>Review of Resident 67's clinical record revealed that a MRR (Medication Record Review) was completed on August 8, 2024, with three recommendations, 1. Please evaluate Quetiapine use for insomnia, 2. Suggest PRN (as needed) Lorazepam order for Anxiety indicates x14 days, 3. Please evaluate Mirtazapine use for appetite without a Depression diagnoses.</p> <p>Further review of Resident 67's clinical record revealed that a MRR (Medication Record Review) was completed on September 10, 2024, with the recommendation, Please evaluate Mirtazapine use for Appetite without a Depression diagnoses.</p> <p>Review of Resident 67's clinical record revealed the physician was signing the pharmacy recommendation reports without any response or indication that the pharmacy recommendations were acted upon.</p> <p>Interview with the Director of Nursing on November 7, 2024, at 12:03 p.m. who confirmed the above findings.</p> <p>(continued on next page)</p>		

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<p>F 0756</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>483.45 Drug Regimen Review, Report Irregular,</p> <p>28 Pa. Code 211.5(f) Clinical records</p> <p>28 Pa. Code 211.5(f) Clinical records</p> <p>28 Pa. Code: 211.12(1)(3)(5) Nursing services.</p> <p>Previously cited 12/14/17 and 10/03/16</p> <p>28 Pa. Code: 211.9(k) Pharmacy services</p>		