

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  395223	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/26/2025
NAME OF PROVIDER OR SUPPLIER  Gardens at West Shore, The		STREET ADDRESS, CITY, STATE, ZIP CODE  770 Poplar Church Road Camp Hill, PA 17011	
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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>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.</p> <p>Based on facility policy review, observations, and resident and staff interviews, it was determined that the facility failed to maintain a safe, clean, comfortable and home-like environment in one of three shower rooms observed. Findings include: Review of facility policy, titled Environmental Services, Clean, Safe and Orderly Environment with an effective date of March 2024, read, in part, The exterior and interior of the facility will be maintained in a clean, safe, and orderly manner. Housekeeping, Laundry and Maintenance services will be provided properly with precautions taken to prevent infection and cross contamination. Observation in the 800/900 Hall shower room on December 26, 2025, at 10:31 AM, revealed there was a spotty black substance on one side as well as one corner of the ceiling above the shower, a pink substance along the wall of the shower, and black and brown substance on the floor of the shower. The pink substance as well as the black and brown substance on the floor were able to be wiped away with a paper towel. The shower room exhibited a strong foul odor consistent with mildew. Further observation in the 800/900 Hall shower room on December 26, 2025, at 10:35 AM, revealed five shampoo bottles toppled over and scattered across the shower floor, as well as several white wipe materials on the shower floor. During an interview with the Nursing Home Administrator (NHA) on December 26, 2025, at 10:35 AM, he revealed he would get the shower room cleaned immediately. Interview with Resident 1 on December 26, 2025, at 10:51 AM, revealed she had concerns that the shower room was dirty and contained mold. Interview with Resident 2 on December 26, 2025, at 10:52 AM, revealed she had concerns that the shower room was dirty and contained mold. Follow up interview with the NHA on December 26, 2025, at 11:52 AM, revealed he would expect the shower room to be kept clean and residents to be provided with a safe, clean, comfortable and home-like environment. 28 Pa. Code 201.18(b)(1) Management</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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