

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  395347	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/01/2024
NAME OF PROVIDER OR SUPPLIER  Oak Hill Center for Rehabilitation and Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE  1020 North Union Street Middletown, PA 17057	

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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47966</b></p> <p>Based on review of the clinical record and staff interview it was determined that the facility failed to ensure care and services are provided in accordance with professional standards of practice that will meet each resident's physical, mental, and psychosocial needs for two of 10 residents reviewed (Resident 3 and 10).</p> <p>Findings include:</p> <p>Review of Resident 3's clinical record revealed diagnosis to include heart failure (a condition that develops when your heart doesn't pump enough blood for your body's needs) and hypertension (high blood pressure).</p> <p>Review of Resident 3's clinical record revealed they were admitted to the facility on [DATE], and discharged home on March 16, 2024.</p> <p>Review of Resident 3's physician orders revealed an order for bath/shower twice weekly every Tuesday/Friday 7:00 AM-3:00 PM shift, with an active date of March 6, 2024.</p> <p>Review of Resident 3's March 2024 Treatment Administration Record revealed the resident received a shower on March 12, 2024.</p> <p>Review of the facility's policy titled, Weight Protocol - Garden and Northwood Healthcare, with an effective date of January 10, 2023, revealed 'Those to be automatic weekly weights - those on tube feed, those with pressure ulcers, new admits for four weeks, and those less than 100 pounds.'</p> <p>Review of Resident 3's discontinued physician orders revealed an order for weekly weights for four weeks then monthly, with a start date of March 6, 2024.</p> <p>Review of Resident 3's clinical record revealed they were weighed on March 6, 2024, weighing 169.0 pounds.</p> <p>During an interview with the Director of Nursing (DON) on May 1, 2024, at 1:12 PM, she confirmed Resident 3 was only weighed on March 6, 2024, and revealed Resident 3 should have been weighed on March 13, 2024, as ordered.</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 - Few</p>	<p>During an interview with the DON on May 1, 2024, at 1:15 PM, revealed Resident 3's bath/shower order was entered incorrectly, therefore Resident 3 did not receive a shower on March 8, 2024, or March 15, 2024.</p> <p>During an interview with the Nursing Home Administrator on May 1, 2024, at 3:05 PM, revealed she would have expected Resident 3 to have received a shower as ordered, and to have been weighed as ordered.</p> <p>Review of Resident 10's clinical record revealed diagnosis to include heart failure (a condition that develops when your heart doesn't pump enough blood for your body's needs) and dementia (impaired ability to remember, think, or make decisions that interferes with doing everyday activities).</p> <p>Review of Resident 10's clinical record revealed they were admitted to the facility on [DATE].</p> <p>Review of Resident 10's current physician orders revealed an order for weekly weights for four weeks then monthly, with an active date of April 12, 2024.</p> <p>Review of Resident 10's clinical record revealed they were weighed on April 12, 2024, weighing 112.0 pounds, and again on May 1, 2024, weighing 110.6 pounds.</p> <p>During an interview with the Director of Nursing on May 1, 2024, at 1:15 PM, she revealed residents normally get weighed on the date of their admission, and again the day after their admission, and then once a week for four weeks.</p> <p>During an interview with the Nursing Home Administrator on May 1, 2024, at 3:05 PM, she revealed she would have expected Resident 10 to have been weighed as ordered.</p>