STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395354	A. Building B. Wing	06/02/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Silver Stream Rehabilitation and Nursing Center	905 Penllyn Pike Spring House, PA 19477

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 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. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations and staff interviews it was determined that the facility failed to provide a clean, safe, comfortable and homelike environment on 1 of the 2 Nursing Units observed (2nd floor Nursing Unit).Findings include:A tour of the facility was conducted on June 2, 2026, at 11:30 a.m., with the Maintenance Director, Employee E3, who confirmed the following observations:In room [ROOM NUMBER] was an air conditioner plugged into an outlet with no face plate around outlet and wires exposed. The phone jack removed from wall and wire hanging out of wall.In room [ROOM NUMBER] there was an outlet removed from the wall, with wires and whole outlet dangling out of the wall and an additional hole in wall.28 Pa Code 201.18(b)(1)Management28 Pa Code 201.18(b)(3)Management

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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F 0610 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Respond appropriately to all alleged violations. Based on review of facility policy, review of facility documentation, review of clinical records, and staff interviews it was determined that the facility failed to ensure a complete and thorough investigation was completed related to neglect allegations for two out of 3 residents reviewed (Resident R2 and Resident R3).Findings include:Review of facility policy titled Abuse, Neglect and Exploitation Prevention Policy, revised February 1, 2026 , revealed to ensure all residents are free from abuse, neglect, mistreatment, and exploitation including staff to resident, resident to resident, visitor to resident, contractor to resident, and any other form of abuse- in accordance with federal and state long term care regulations. This facility maintains a zero-tolerance policy toward abuse of any kind. This includes abuse committed by staff, volunteers, contractors, consultants, agency personnel, visitors, or other residents. All residents have the right to live in a safe environment free from physical, emotional, sexual, financial, or verbal abuse. All allegations, suspicions, or observed incidents of abuse must be reported immediately and investigated promptly.Further review of this policy includes the following definitions: Emotional/psychological abuse: Verbal or nonverbal conduct that causes fear, distress, humiliation or mental anguish and Neglect: Failure to provide necessary care, goods, or services to avoid harm, pain, or distress.Review of facility documentation revealed a grievance filed for Resident R3 dated March 31, 2026. Review of the grievance revealed Resident R3 alleged Nurse Aide, Employee E4, has been rude and not answering the call bell. Resident R3 alleged Nurse Aide, Employee E4, failed to inform the nurse of his/her request for Tylenol and denied to remake the resident's bed due to no sheets being available. Further review of grievance for Resident R3, revealed Investigation/ Follow-up to complaint/ grievance: An investigation was performed. There have been multiple incidents regarding this same Nursing assistant. A verbal write-up was given, now nursing assistant will be placed on suspension for 3 days. Nursing assistant will be educated on customer service and round on residents.Interview on June 2, 2026, at approximately 1:00 p.m. with Director of Nursing, Employee E2, revealed no investigation for abuse/neglect was available for review regarding allegations filed by Resident R3.Review of facility documentation revealed a grievance filed for Resident R2 dated May 25, 2026. Review of the grievance revealed Resident R2 alleged Nurse Aide, Employee E4, was asleep during his/her shift on Sunday May 17, 2026, during the 11p.m. to 7 a.m. shift. Resident R2 also alleged that care was inadequate on Sunday May 24, at 11:30 a.m.Further review of grievance dated May 25, 2026, for Resident R2 revealed To ensure abuse and neglect are ruled out promptly, does this grievance require further investigation? and No is checked off.Interview on June 2, 2026, at approximately 3:00 p.m. with Nursing Home Administrator, Employee E1, revealed no investigation for abuse/neglect was available for review regarding allegations filed by Resident R2. 28 Pa. Code 201.18 (a)(1) Management.28 Pa. Code 201.18 (a)(3) Management.28 Pa. Code 211.12 (d)(1) Nursing services. 28 Pa. Code 211.12 (d)(2) Nursing services. 28 Pa. Code 211.12 (d)(5) Nursing services.

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F 0697 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide safe, appropriate pain management for a resident who requires such services. Based on review of clinical records and staff interviews, it was determined that the facility failed to provide appropriate pain management services for one of two residents reviewed for pain management (Resident R1).Findings include:Review of Resident R1's clinical record revealed the resident had a diagnosis of encephalopathy (altered mental state or confusion caused by a medical condition affecting brain function) , schizoaffective disorder (mental health disorder that includes symptoms of both schizophrenia and a mood disorder), and type 2 diabetes mellites (chronic disease in which the body does not use insulin properly and/or does not make enough insulin, causing blood sugar (glucose) levels to become too high).Review of hospital discharge documentation, dated May 22, 2026, revealed Resident R1 returned to the facility following a hysterectomy with physician orders for Tramadol 50 mg by mouth every 6 hours as needed for moderate pain (pain score 4-6).Review of Resident R1's clinical record, physician orders, and Medication Administration Record (MAR) revealed the Tramadol order was not entered into the facility's medication system upon the resident's return from the hospital. Further review revealed Resident R1 did not receive the prescribed Tramadol until May 24, 2026, following readmission.Review of Resident R1's nursing progress note, dated May 24, 2026, revealed the order for Tramadol 50 mg was entered into the system.Further review of Resident R1's nursing progress note, dated May 24, 2026, revealed medication on the cart, order placed in system, first dose of medication given.Interview with Director of Nursing on June 02, 206 at 1:10 p.m. confirmed the hospital discharge orders included Tramadol 50 mg for pain management and confirmed the order was not entered into the system until May 24, 2026.28 Pa. Code 211.12 (d)(1) Nursing services28 Pa. Code 211.12 (d)(3) Nursing services28 Pa. Code 211.12 (d)(5) Nursing services28 Pa. Code 211.9 (f)(2) Pharmacy services