

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395374	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/15/2024
NAME OF PROVIDER OR SUPPLIER Yeadon Rehabilitation and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE Lansdowne and Lincoln Ave Yeadon, PA 19050	

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 0585</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 voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>43923</p> <p>Based on review of facility policy, and interviews with residents and staff, it was determined that the facility failed to establish grievance policies and procedures that include the right to file a grievance for 2 of 13 residents reviewed.</p> <p>Findings include:</p> <p>Review of facility policy titled Grievance Policy revealed each resident has the right to voice grievances to the facility or other agency or entity that hears grievances without discrimination or reprisal and without fear of discrimination or reprisal .</p> <p>Interview with Resident R2 on March 15, 2024, at 10:41 a.m. revealed that call bell response being a problem, last weekend it took two hours to get a response. Resident R2 did notify administration and he reported that I'll take care of it.</p> <p>Interview with Resident R1 on March 15, 2024, at 10:43 a.m. revealed that call bell response being a problem and last weekend it took couple of hours for her call bell to be answered. The call bell response is the worse during the shift form 3PM-11PM, 11PM-7AM and weekends. Resident R1 also complained about food taste being horrible and that no menus are provided to make preference for meals. Resident R1 did inform the nurse supervisor and administration and was told by the administrator I'll take care of it.</p> <p>During a tour with Unit Manager, Employee E3, on March 15, 2024, at 11:48 a.m. Resident R13 filed a grievance with the Unit Manager, Employee E3 as the Resident's R13's call bell response was 1.5 hours. Employee E3 reported that she had a meeting with her staff to address the response time, but it was not documented as a grievance, nor was it communicated to the Resident R13 the resolution of the outcome of his grievances.</p> <p>Three months from December 2023, January -March 2024 were reviewed and the above grievances were not documented nor reflected in the grievance log for those dates. Three grievances were pulled that had a call bell, dietary and care issues which the forms reveled that residents or resident representatives were not contacted to share the resolution of the grievance.</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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Interview with the Nursing Home Administrator on March 15, 2024, at 2:43 p.m. confirmed that the results of the grievances were not communicated to residents or resident representatives. The Nursing Home Administrator shared that they implemented call bell audit program of doing audits three times a week as on the last Resident Council meeting notes which occurred on February 29, 2024, residents expressed a concern with call bell of lack of response.</p> <p>28 Pa. Code 201.18(b)(3) Management</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43923</p> <p>Based on observations and interviews with resident and staff, it was determined that the facility failed to ensure a safe sanitary and functional environment for 6 residents and 15 residents rooms of two floors (Resident R1, R2, R3, R10, R14, R15; First, A, B, C and Second floor nursing units).</p> <p>Finding Include:</p> <p>Interview with Resident R1 on March 15, 2024, at 10:41 a.m. observations were made a dirty left over breakfast and of a take out order of scrambled eggs, steak and pasta . Resident R1 reported that it has been on her bedside dresser for two days and it's still here. Observations of Resident R1's restroom revealed a takeout container with dirty water being soaked on the top the toilet lid. Resident R1 reported that that container belonged to her roommate, Resident R2 who was interviewed at this time and reported that she does not desire to keep that container and is unsure why it's on the toilet. The restroom also had two basins on the floor.</p> <p>Interview and observations were completed on March 15, 2024, at 11: 40 a.m. with license nurse Employee E4 at the nursing station that has a refrigerator where residents are allow to store left over food. The inspection revealed a package for Resident R3 which was dated February 29, 2024, which was unopened. Interview was held in the Resident R3 room [ROOM NUMBER] which revealed dirty window shades and privacy curtain with large brown spots, window ceil had crumbs, all over the ceil, brown and dark liquid spills, ants crawling on the window ceil, two large dirty containers and one large animal cracker container that was empty on the window sill. Resident also confirmed that he had his toothbrush and tooth paste on the same unsanitary window sill which belonged to him. Resident R3 reported that he doesn't want any containers saved and all container to be removed and thrown away.</p> <p>During a tour with Unit Manager, Employee E3, on March 15, 2024, at 11:48 a.m., confirmed the above findings and revealed a broken toilet paper holder in room [ROOM NUMBER]. A large pile of dirty pile of clothing on the Resident's chair which was across the Resident's R3 bed which needed to be washed by the facility. room [ROOM NUMBER] was cleaned by the housekeeping staff, Employee E10; however, unit manager confirmed that B bed had dirty napkins underneath the bed, crumbs, bag of clothing. Bed C had pumpkin seeds on the edges of the walls, dirty hair, and grey dirt on the wet floor. Resident R10 who was located in bed C also had black 4-5 large bags against the wall that were on the floor of resident's belonging.</p> <p>On March 15, 2024, at 2:19 p.m. on the second-floor room [ROOM NUMBER] with Resident R15 and Resident R14's lunch trays were still at the bedside. Resident R15 reported that he/she was done with his lunch an hour ago and prefers for his tray to be removed much more sooner.</p> <p>On March 15, 2024, at 2:32 p.m. unit manger on the second floor, Employee E11 confirmed that staff are just collecting lunch trays from the second floor including trays from room [ROOM NUMBER].</p> <p>On March 15, 2024, at 2:40 p.m. a strong urine smell was confirmed by the Administrator and Director of Nursing, Employee E2 on the first floor after you enter the A unit.</p> <p>(continued on next page)</p>		

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F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	28 Pa. Code 201.14 (a) Responsibility of licensee. 28 Pa. Code 201.18 (b)(1) Management.