

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395451	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/07/2024
NAME OF PROVIDER OR SUPPLIER Inners Creek Skilled Nursing and Rehabilitation Ce		STREET ADDRESS, CITY, STATE, ZIP CODE 100 West Queen Street Dallastown, PA 17313	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 37817</p> <p>Based on clinical record review, and staff interviews it was determined that the facility failed to provide pharmaceutical services to assure the accurate acquiring, receiving, dispensing, and administration of drugs to meet the needs of each resident for one of 6 residents reviewed (Resident 4).</p> <p>Findings include:</p> <p>Review of Resident 4's clinical record revealed diagnoses that included: Parkinson's Disease (a progressive disease of the nervous system marked by tremor, muscular rigidity, and slow imprecise movement), hypertension (high blood pressure), and depression (feelings of severe despondency and dejection).</p> <p>Further clinical record review revealed Resident 4 was admitted to the facility on [DATE].</p> <p>Review of Resident 4's physician orders, medication administration record and progress notes revealed the following medications weren't administered on the following dates and times: Carbidopa-Levodopa Oral Tablet 25-100 MG, 1 tablet by mouth four times a day (scheduled to be administered 7:30 AM, 11:30 AM, 4:30 PM, 9:30 PM and as needed) for Parkinson's, ordered on February 20, 2024, to start February 20, 2024. The medication was documented as administered on February 20, 2024 at 9:30 PM, however the subsequent dose on February 21, 2024 at 7:30 AM wasn't administered and was documented as pending pharmacy delivery; Carvedilol Oral Tablet 6.25 MG, 6.25 mg two times a day (scheduled to be administered 8:00 AM and 8:00 PM) for hypertension, ordered February 20, 2024, to start February 20, 2024. The medication was documented as not administered February 20, 2024, at 8:00 PM due to pending pharmacy delivery; and Mirtazapine Oral Tablet Disintegrating 15 mg by mouth one time a day (scheduled to be administered 8:00 PM) for depression, ordered on February 20, 2024, to start February 20, 2024. The medication was documented as not administered on February 20, 2024, at 8:00 PM due to pending pharmacy delivery.</p> <p>Review of the facility's stocked medications in Omnicell (on-site automated system for medication storage and dispensing) revealed it included the following medications: Mirtazapine (medication used to treat depression) 7.5 milligrams (mg-unit of measure); carvedilol (medication use to treat hypertension) 3.125 mg; and carbidopa-levodopa (medication used to treat Parkinson's) 25-100mg tablet.</p> <p>The facility failed to administer the aforementioned medications to Resident 4 that were available in the Omnicell.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview with the Nursing Home Administrator on March 7, 2024, at 2:00 PM it was revealed that the aforementioned medications should have been administered to Resident 4 utilizing the Omnicell stock.</p> <p>28 Pa. Code 211.9(1) Pharmacy services.</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing services.</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.</p> <p>37817</p> <p>Based on observation, review of facility policy, and staff interview it was determined that the facility failed to provide food and beverage that were at a safe and appetizing temperature for one of one meal observed on the short-stay rehabilitation unit.</p> <p>Findings include:</p> <p>Food and Nutrition Services Policies and Procedures Food service Quality Indicators Policy, revised May 1, 2023, read, in part, foods are served at temperatures appropriate for food safety and palatability.</p> <p>Review of the Food and Nutrition Services Test Tray evaluation form, revised May 1, 2023, documented that hot entrees, starches ,vegetables and hot beverages should be greater than 140 degrees Fahrenheit, milk should be at or below 45 degrees Fahrenheit, and cold beverages and desserts should be at or below 55 degrees Fahrenheit.</p> <p>Review of the Resident Council meeting minutes for January and February 2024, revealed ongoing concerns with the quality and the temperature of food during mealtimes.</p> <p>A test tray was completed on March 6, 2024, on the short-stay rehabilitation unit. Test tray temperatures were taken by Registered Dietitian (RD) on March 6, 2024, at 12:35 PM, and revealed the following:</p> <p>Chicken breast - 139 degrees Fahrenheit, not acceptable temperature</p> <p>Mashed potatoes - 138 degrees Fahrenheit, not acceptable temperature</p> <p>Mixed vegetables - 129 degrees Fahrenheit, not acceptable temperature</p> <p>Ambrosia - 55 degrees Fahrenheit, palatable</p> <p>Orange juice - 55 degrees Fahrenheit, palatable</p> <p>Coffee - 124 degrees Fahrenheit, not acceptable temperature (coffee temperature tested in the kitchen during tray line service at 12:45 PM).</p> <p>During an interview with Employee 1 (Registered Dietitian (RD)) on March 6, 2024, at 12:40 PM and 1:30 PM it was revealed that the hot foods should be warmer and the cold items cooler.</p> <p>Observation in the kitchen on March 6, 2024, at 12:45 PM revealed the lunch meal was being served off the tray line. The middle well on the steam table was not functioning, and was utilized to hold the chicken during meal service.</p> <p>(continued on next page)</p>		

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<p>F 0804</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>During an interview with the Nursing Home Administrator on March 6, 2024, at approximately 3:30 PM, it was revealed that the food and beverage temperatures during the test tray weren't acceptable, and that maintenance was informed about the steamtable well that wasn't functioning and was in the process of repairing it.</p> <p>28 Pa. Code 201.18(b)(1)(3) Management.</p> <p>28 Pa. Code 201.14(a) Responsibility of licensee.</p>		