STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395461	A. Building B. Wing	05/19/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Tucker House Nursing and Rehabilitation Center	1001 Wallace Street Philadelphia, PA 19123

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 0602 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Protect each resident from the wrongful use of the resident's belongings or money. Based on interviews with residents and staff, a review clinical records, review of facility policy and documents, it was determined that the facility did not ensure that residents were free from misappropriation of resident property related to medication given to another resident for one of two residents reviewed (Resident R4). Findings include: A review of the Administering Medications Policy, Reviewed on December 11, 2024, revealed that medications ordered for a particular resident may not be administered to another resident, unless permitted by State law and facility policy, and approved by the Director of Nursing Services. Further review of this policy revealed the individual administering medications must verify the resident's identity before giving the resident his/her medications. Methods of identifying the resident include: Checking identification band; Checking photograph in PCC; Calling resident by name; and if necessary, verifying resident identification with other facility personnel. Interview with Resident R1 on May 18, 2026, at 11:15 a.m. revealed that when his medication runs out, the nurse just takes it from another resident. He went on to say that this is not right, what happens when that medication runs out? When asked when this last happened he said that it happened this morning. When asked what medication, the resident said it was his 800 milligrams of gabapentin (anticonvulsant used to treat partial seizures, nerve pain from shingles, and restless legs syndrome). Review of Resident R1's clinical records revealed a March 9, 2026, physician's order for Gabapentin 800 mg oral tablet, give one tablet by mouth three times a day for nerve pain and seizures. Interview with Licensed Nurse, Employee E4, on May 1, 2026, at 2:01 p.m. confirmed that Resident R1's gabapentin 800 mg tablet had run out and she gave him an 800 mg tablet from Resident R4's blister pack. The Director of Nursing (DON) asked Employee E4 if she had pulled the medication from the Pyxis machine (an automated medication dispensing system used in healthcare facilities to securely store, track, and manage medications). She said no, that she took it from Resident R4's blister pack. The DON then checked Resident R1's medication, and there was no blister pack for his gabapentin. The DON then pulled Resident R4's 800 mg gabapentin blister pack and confirmed with Employee E4 that she had pulled the medication for Resident R1 from this blister pack. Interview with the Director of Nursing on May 18, 2026, at 2:05 p.m. stated that she could not believe that this nurse would give another resident's medication to a different resident, and that she thought she would know better and to use the Pyxis machine. 28 Pa Code 201.18(b)(2) Management 28 Pa Code 211.9(a)(1) Pharmacy services 28 Pa Code 211.12(d)(5) Nursing services

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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0804 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature. Based on observations, and resident interviews, it was determined that the facility failed to provide food and drink that was palatable and served at the proper temperature for five of nine residents reviewed (Residents R1, R5, R6, R9, R10, R12 and R13).Findings include: A review of the Food and Nutrition Services Test Tray Evaluation form- revealed that the hot foods should be served at or above 135 degrees, and the cold beverage and dessert should be served at or below 50 degrees. During a tour of the facility on May 18, 2026, the following resident interviews were obtained: Interview with Resident R1 at 12:05 p.m. revealed that he does not like the food, it is overprocessed to the point that you don't know what you're eating, it makes me sick to my stomach. Interview with Resident R5 at 11:35 a.m. revealed that she thought that the food was really bad, it is always cold. I am a diabetic and I can't have apple juice, it shoots up my blood sugar, and that is what they send me. I am a brittle diabetic and on Friday they did not send me my evening snack. Interview with Resident R6 at 11:39 a.m. revealed that the meals are bad, that there is a lot of repetition, like chicken all the time. And it is not always hot. Interview with Resident R9 at 11:46 a.m. revealed that the food either has no taste or it is too spicy. Interview with Resident R10 at 11:51 a.m. revealed that the food is horrible, like dog food, I have to get a sandwich all the time. Interview with Resident R12 at 11:54 a.m. revealed that the food is no good, not always hot. Interview with Resident R13 at 11:58 a.m. revealed that the food is lousy, always cold. Observations during a test tray conducted by the Food Service Director (FSD), Employee E5 on May 18, 2026, at 12:55 p.m. revealed that the apple juice was served at 55 degrees Fahrenheit, and the sliced apples dessert was served at 68 degrees Fahrenheit, both well above an acceptable range. The pulled pork was served at 126 degrees Fahrenheit, the diced potatoes were served at 111 degrees Fahrenheit, the peas were served at 109 degrees, and the coffee was served at 124 degrees Fahrenheit all below the acceptable 135 degrees Fahrenheit. Interview with the FSD on May 18, 2026, at 1:05 p.m. confirmed the results of the test tray. 28 Pa. Code 201.14(a) Responsibility of licensee

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F 0925 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Make sure there is a pest control program to prevent/deal with mice, insects, or other pests. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interviews, and a review of facility policies and documentation, it was determined that the facility was not maintaining an effective pest control program. Findings include: A review of the facility Pest Control policy revised on September 27, 2024, revealed that it states that the facility maintains an on-going pest control program to ensure that the building is kept free of insects and rodents. Interview with Resident R5 on May 18, 2026, at 11:35 a.m. revealed that pests were a problem and that she saw a mouse about a month ago in her room. Interview with Resident R8 on May 18, 2026, at 11:47 a.m. revealed that pest are an ongoing problem she sees bugs and heard about mice too. Interview with Resident R13 on May 18, 2026, at 11:58 a.m. revealed that mice are an issue, he sees them running around from the hall into his room, they need to get rid of them. Interview with Resident R1 on May 18, 2026, at 12:05 p.m. revealed that he was concerned about an infestation of cockroaches and mice in the building, that they have been putting roach traps in his room, but he still saw one on the sink yesterday. He said that he was sitting in the dining room the other day and one was on the wall. It is just disgusting; how can you eat after that. A review of the pest logs from the third floor revealed the following entries: March 3, 2026, mice droppings in rooms 320, 321, 323, 324March 19, 2026, mice in room [ROOM NUMBER]March 24, 2026, mice in room [ROOM NUMBER]April 23, 2026, mice roaming near room [ROOM NUMBER]April 23, 2026, mice in the dining room and room [ROOM NUMBER]May 8, 206, mice in room [ROOM NUMBER]May 10, 2026, mice in room [ROOM NUMBER], 314, 320 A review of the pest control company's reports revealed the following concerns: Invoice A579209 revealed that on April 23, 2026, the pest control technician found mouse droppings in the maintenance office which was treated, and the report indicated mouse activity in room [ROOM NUMBER] and room [ROOM NUMBER] which both had voids in the walls that need to be sealed along with voids in the third floor dining room. Invoice A579208 from an April 16, 2026, visit revealed that technician received a verbal report from the Administrator about mice activity in room [ROOM NUMBER], and that the technician observed a void in the corner of the room, took picture and shared it with the Administrator. Technician received a verbal report with the resident in room [ROOM NUMBER] about mouse activity, observed a void along the baseboard and this was reported to the Administrator. Invoice 577161 from an April 15, 2026, visit where the technician indicated that he found a heavy infestation of German cockroaches throughout the dresser, underneath the bed and throughout the clothing. Invoice 577155 from and April 10, 2026, visit where the technician indicated activity in the dresser drawers in rooms 221, 410 and 411 which need to be cleared for the next treatment. Invoice A574490 from a visit on March 26, 2026, when following up on a report of mice in room [ROOM NUMBER] where he found a hole in the wall in the corner near the window. An interview on May 18, 2026, at 2:45 p.m., with the Administrator, confirmed the third floor pest log entries and the reports from the pest control company showing the voids and holes in the walls and cockroach and mouse activity in the building in the past three months. 28 Pa. Code: 207.2(a) Administrator's responsibility