STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395485	A. Building B. Wing	03/25/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Graduate Post Acute	1526 Lombard Street Philadelphia, PA 19146

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 0656 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured. Based on staff interviews and the review of clinical records, it was determined that the facility failed to ensure a person-centered plan of care for a resident who the facility reported as refusing to get out of bed for 1 out of 2 residents reviewed (Resident R1).Findings include: Review of the facility's policy Care Plans, Comprehensive Person-Centered, with a revision date of March 2022, indicated that the comprehensive care plan will include measurable objectives and time frames, in addition to a description of services that the facility would otherwise provide to the resident, but are not provided due to the resident exercising his/her rights, including the right to refuse. Review of the March 2026 physician orders for Resident R1 include the following diagnosis: asthma, hypertension (high blood pressure) anxiety, and morbid obesity and quadriplegia (paralysis of all four libs). Review of information reported to the State Survey Agency on February 20, 2026, included concerns related to the resident not getting the assistance that (he/she) needed to get out of bed since (his/hers) admission into the facility on December 26, 2025. Review of the resident's clinical notes from December 2025-March 2026 did not include any evidence of documentation from nursing staff that the resident refused to get out of bed when asked by nursing staff, including any of the nurse aides assigned to the resident. Review of the resident's person-centered plan of care also did not show evidence that the resident had a plan of care related to refusals of getting out of bed when offered. During an interview with the Director of Nursing (DON) on March 25, 2026, at 3:31 p.m. the DON reported that the resident refuses to get out of bed when he is offered to do so by staff. The DON reported that staff has notified her of this. It was discussed during this time that there is no documentation of refusals related to the resident not wanting to get out of bed in the clinical notes or in the person-centered plan of care. 28 Pa Code 211.10(c) Resident care policies28 Pa Code 211.10(d) Resident care policies28 Pa Code 211.11(d) Resident care plan28 Pa. Code 211.12(c(1))Nursing services28 Pa. Code 211.12(d)(1) Nursing services28 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