STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395556	A. Building B. Wing	06/11/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Shenandoah Senior Living Community	101 E. Washington St Shenandoah, PA 17976

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 0807 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure each resident receives and the facility provides drinks consistent with resident needs and preferences and sufficient to maintain resident hydration. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on a review of select facility policy, observations, and resident and staff interviews, it was determined the facility failed to ensure that fresh drinking water was consistently readily accessible to residents to promote adequate hydration, meet resident preferences, and maintain their comfort for four residents of 24 residents observed for the presence of drinking water. (Residents 1,2,3,4).Findings include: A review of the facility policy titled Serving Drinking Water last reviewed by the facility on June 2025, indicated the facility will provide a fresh supply of drinking water and provide adequate fluids for the residents. During the survey, an observation of a dietary cart with water pitchers stacked on it, was located in the hallway across from the nursing station of the C and D units. This surveyor observed the cart there at 10:00 AM, and at 12:30 PM. A review of the clinical record revealed Resident 1 was admitted to the facility July 18, 2018, A review of the quarterly Minimum Data Set(MDS , a federally mandated standardized assessment process conducted periodically to plan resident care) dated May 14, 2026 revealed that Resident 1 is cognitively intact with a BIMS score of 15 (Brief Interview for Mental Status, a tool within the Cognitive Section of the MDS that is used to assess the resident's attention, orientation, and ability to register and recall new information; a score of 13 to 15 indicates cognition is intact) An interview with Resident 1 conducted on June 6,2026 at 11:20 AM revealed her water pitcher was picked up sometime during the night so it could be cleaned, but it had not yet been returned. She stated staff usually provide residents with a Styrofoam cup, but she did not get one. Observations of Resident 1's room revealed no water pitcher or Styrofoam cup at the resident's bedside. A review of the clinical record revealed Resident 2 was admitted to the facility on [DATE]. A review of a quarterly Minimum Data Set assessment dated [DATE] revealed that Resident 2 was cognitively intact with a BIMS score of 15. An interview conducted on June 11, 2026, at 11:45 AM revealed Resident 2 needs to drink as much as possible. He stated his pitcher was taken during the night but not yet returned to him. An observation of Resident 2's room revealed no water pitcher or Styrofoam cup at the resident's bedside. A review of the clinical record revealed Resident 3 was admitted on [DATE]. A review of a quarterly Minimum Data Set assessment dated March17, 2026, revealed that Resident 3 was cognitively intact with a BIMS score of 15. An interview conducted on June 11, 2026, at 11:20 AM revealed Resident 3 stated If I don't ask for it, it don't get it. She reported that night shift will come around with a water pitcher but it's not consistent. An observation in Resident 3's room revealed no water pitcher or Styrofoam cup. A review of the clinical record revealed that Resident 4 was admitted to the facility on [DATE]. A review of the quarterly Minimum Data Set assessment dated [DATE] revealed that Resident 4 was cognitively intact with a BIMS score of 15. An interview conducted on June 11,2026, 11:15 AM revealed that that she had to ask for the water today as night shift took her pitcher and left her without any water or anything to drink. She reported she woke up thirsty and did not have any water available to drink at the bedside. She stated no staff provided water until she asked for it around 11 :00 AM. An observation of a water pitcher was noted to be at Resident 4's bedside. An interview with Employee 1, LPN (Licensed Practical Nurse), on June 11, 2026, at 12:30 PM revealed that water pitchers are collected every other night by the (continued on next page)

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0807 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	night shift staff to send to dietary for cleaning. She indicated that usually residents are given a Styrofoam cup with water when the pitchers are being cleaned and residents can ask for them to be filled when needed. When asked by this surveyor when the stacks of water pitchers on a dietary cart located in the hallway by the nurse's station of the Cand D units will be passed, the nurse replied they would be passed after lunch. An interview with Employee 2, Nurse aide, on June 11, 2026, at 1:55 PM, revealed that Nurse-aides are to pass ice with water to the residents to the residents each shift. When this surveyor asked the nurse aide if they passed out the pitchers with water and ice to the residents, she indicated it was not yet passed during her shift. An observation on June 11, 2026, at 2:00 PM revealed the water pitchers stacked on a dietary care located in the hallway across from the nurse's station for the C and D nursing units was still present and not passed to the residents. An interview with the Director of Nursing (DON) on June 11, 2025, at 2:05 PM, confirmed that facility protocol requires residents to receive fresh water and ice with staff passing it each shift. On the nights pitchers are to be cleaned during the 11:00 PM to 7:00 AM shift, residents are to be provided with Styrofoam cups that are to be refilled as needed. The DON acknowledged that the facility did not ensure fresh ice water was consistently accessible to residents during all shifts as outlined in the facility policy. 28 Pa. Code 211.12 (d)(3)(5) Nursing services. 28 Pa. Code 211.10 (a)(d) Resident care policies.