

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395572	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/10/2024
NAME OF PROVIDER OR SUPPLIER Fairview Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 900 Manchester Road Fairview, PA 16415	

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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40177</p> <p>Based on review of clinical records and staff interview, it was determined that the facility failed to maintain complete and accurate documentation for one of 25 residents reviewed (Resident R11).</p> <p>Findings include:</p> <p>No policy was provided on documentation related to tube feeding.</p> <p>Resident R11's clinical record revealed an admitted [DATE], with diagnoses that included gastrostomy (surgical opening into the stomach for nutritional support), dysphagia (difficulty in swallowing food and liquids, which may interfere with the person's ability to eat and drink) and stroke.</p> <p>Resident R11's clinical record revealed a physician's order dated 5/20/23, for the enteral feeding of Fibersource HN (nutritional formula) at 50 milliliters (ml) every hour continuous via gastric tube (a total of 400 ml per shift and 1200 ml total of formula). A physician's order dated 2/12/24, for enteral feeding revealed to change the Fibersource HN to 55 ml every hour continuous via gastric tube (a total of 440 ml per shift and 1320 ml total of formula). A physician's order dated 2/12/24, revealed to maintain hydration flush tube with 100 ml water every four hours (200 ml per shift).</p> <p>Review of the January 2024 Medication Administration Record (MAR) for Resident R11's enteral feeding dated 1/1/24, through 1/31/24, revealed that for day shift the documented ml intake was X for 31 of 31 days, for evening shift the documented ml intake was X for 30 of 31 days and was blank for one of 31 days, and for the overnight shift the documented ml intake was X for 30 of 31 days.</p> <p>Review of the February 2024 MAR for Resident R11's enteral feeding dated 2/1/24, through 2/29/24, revealed that for day shift the documented ml intake was X for four of 29 days and 240 ml below the ordered amount for two of 29 days, for evening shift the documented intake was X for three of 29 days, blank for two of 29 days, NA for one of 29 days, and 240 ml below the ordered amount for five of 29 days, for the overnight shift the documented ml intake was X for two of 29 days, blank for two of 29 days, 240 ml below the ordered amount for one of 29 days, and 390 ml below the ordered amount for one of 29 days.</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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the February 2024 MAR for Resident R11's every four hour water flush dated 2/12/24, through 2/29/24, revealed that for day shift the documented ml flush was 240 ml over the ordered amount for one of 17 days, for evening shift the documented ml flush was blank for two of 17 days, was 55/hr for two of 17 days, and was 240 ml over the ordered amount for four of 17 days, for the overnight shift the documented ml flush was blank for one of 18 days, was 50 ml/hr for one of 18 days, and was 240 ml over the ordered amount for five of 18 days.</p> <p>Review of the March 2024 MAR for Resident R11's enteral feeding dated 3/1/24, through 3/31/24, revealed that for day shift the documented ml intake was 240 ml below the ordered amount for one of 31 days, for evening shift the documented ml intake was NA for two of 31 days, blank for one of 31 days, zero for one of 31 days, 240 ml below the ordered amount for 18 of 31 days, 340 ml below the ordered amount for four of 31 days, and 476 ml above the ordered amount for one of 31 days, for the overnight shift the documented ml intake was blank for two of 31 days, and was 240 ml below the ordered amount for six of 31 days.</p> <p>Review of the March 2024 MAR for Resident R11's every four hour water flush dated 3/1/24, through 3/31/24, revealed that for day shift the documented ml flush was 240 ml above the ordered amount for one of 31 days, for evening shift the documented ml flush was blank for one of 31 days, NA for one of 31 days, was zero for one of 31 days, was 100 ml below the ordered amount for five of 31 days, and was 240 ml above the ordered amount for three of 31 days, for the overnight shift the documented ml flush was blank for two of 31 days and was 240 ml above the ordered amount for three of 31 days.</p> <p>Review of the April 2024 MAR for Resident R11's enteral feeding dated 4/1/24, through 4/30/24, revealed that for day shift the documented ml intake was 55 ml below the ordered amount for one of 30 days, 110 ml below the ordered amount for one of 30 days, and 240 ml below the ordered amount for one of 30 days, for evening shift the documented ml intake was 55 ml below the ordered amount for one of 30 days, 110 ml below the ordered amount for one of 30 days, 240 ml below the ordered amount for 16 of 30 days, 340 ml below the ordered amount for five of 30 days, and 786 ml above the ordered amount for 1 of 30 days, for the overnight shift the documented ml intake was 240 ml below the ordered amount for five of 30 days.</p> <p>Review of the April 2024 MAR for Resident R11's every four hour water flush dated 4/1/24, through 4/30/24, revealed for day shift the documented ml flush was 100 ml below the ordered amount for one of 30 days, for evening shift the documented ml flush was zero for one of 30 days, 100 ml below the ordered amount for four of 30 days, 130 ml below the ordered amount for one of 30 days, 200 ml above the ordered amount for one of 30 days, and 240 ml above the ordered amount for three of 30 days, for the overnight shift the documented ml intake was 240 ml above the ordered amount for five of 30 days.</p> <p>Review of the May 2024 MAR for Resident R11's enteral feeding dated 5/1/24, through 5/8/24, revealed that for evening shift the documented ml intake was blank for one of eight days, 220 ml below the ordered amount for one of eight days, and 240 ml below the ordered amount for four of eight days, for the overnight shift the documented ml intake was 240 ml below the ordered amount for one of eight days.</p> <p>(continued on next page)</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of the May 2024 MAR for Resident R11's every four hour water flush dated 5/1/24, through 5/8/24, revealed that for evening shift the documented ml flush was blank for one of eight days, 20 ml below the ordered amount for one of eight days, 100 ml below the ordered amount for one of eight days, and 100 ml above the ordered amount for one of eight days, for the overnight shift the documented ml flush was 240 ml above the ordered amount for three of eight days.</p> <p>During an interview on 5/9/24, at approximately 3:02 p.m. the Director of Nursing confirmed that Resident R11's clinical record contained incomplete and inaccurate documentation related to his/her tube feeding formula and water flushes.</p> <p>28 Pa. Code 201.14(a) Responsibility of licensee</p> <p>28 Pa. Code 211.12(d)(1)(2)(5) Nursing services</p>		