

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395687	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/20/2026
NAME OF PROVIDER OR SUPPLIER York Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 7101 Old York Road Philadelphia, PA 19126	

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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>Based on interview with resident and staff, review of clinical record and facility provided documentation, it was revealed that facility did not ensure to administer medications according to professional standards of practice for two of five residents reviewed (Residents R1, R12) Findings include: Review of facility policy 'Administering Medications,' revised June 1, 2025, states that the individual administering the medication must check the label to verify the right medication, right dosage, right time and right method of administration before giving the medication. Review of medication administration report revealed Resident R1 was administered the following medications at times which were not in accordance with physician orders on, April 9, 2026: Fluticasone-Salmeterol 250-50 MCG/ACT Aerosol, Powder, breath activated Give 2 puff by mouth two times a day for SOB, Scheduled time at 9:00 a.m.; Administered at 10:41 a.m.; Scheduled time: 5:00 p.m.; Administration Time: 6:47 p.m. Apixaban Oral Tablet 5 MG (Apixaban) Give 1 tablet by mouth every 12 hours for DVT Scheduled time: 9:00 a.m.; Administration Time: 10:37 a.m. Fluticasone Propionate Nasal Suspension 50 MCG/ACT (Fluticasone Propionate (Nasal) 2 sprays in both nostrils two times a day for seasonal allergies for 30 Days; Scheduled time: 9:00 a.m.; Administration Time: 10:41 a.m. Mucinex Oral Tablet Extended Release 12 Hour 600, MG (Guaifenesin) Give 1 tablet by mouth every 12 hours for cough for 14 Days; Scheduled time: 9:00 a.m.; Administration Time: 10:38 a.m. Macrobid Oral Capsule 100 MG (Nitrofurantoin Monohyd Macro) Give 1 capsule by mouth every 12 hours for UTI (urinary track infection) for 5 Days X 5 days; Scheduled time: 9:00 a.m.; Administration Time: 10:37 p.m. Albuterol Sulfate Nebulization Solution (2.5 MG/3ML), 0.083% 3 ml inhale orally via nebulizer every 6 hours for COPD Supplementary; Scheduled time: 12:00 p.m.; Administration Time: 1:48 p.m. Review of medication administration report revealed Resident R1 had the following medications administered on April 10, 2026 which were not in accordance to the time frame prescribed by the physician. Apixaban Oral Tablet 5 MG (Apixaban) Give 1 tablet by mouth every 12 hours for DVT; Scheduled time: 9:00 a.m.; Administration Time: 11:35 p.m. Fluticasone-Salmeterol 250-50 MCG/ACT Aerosol Powder, breath activated Give 2 puff by mouth two times a day for SOB; Scheduled time: 9:00 a.m.; Administration Time: 11:35 p.m. Mucinex Oral Tablet Extended Release 12 Hour 600 MG (Guaifenesin) Give 1 tablet by mouth every 12 hours for cough for 14 Days; Scheduled time: 9:00 a.m.; Administration Time: 11:35 a.m. Macrobid Oral Capsule 100 MG (Nitrofurantoin Monohyd Macro) Give 1 capsule by mouth every 12 hours for UTI for 5 Days X 5 days; Scheduled time: 9:00 a.m.; Administration Time: 11:35 a.m. Fluticasone Propionate Nasal Suspension 50 MCG/ACT (Fluticasone Propionate (Nasal) 2 sprays in both nostrils two times a day for seasonal allergies for 30 Days; Scheduled time: 9:00 a.m.; Administration Time: 11:35 p.m. Albuterol Sulfate Nebulization Solution (2.5 MG/3ML) 0.083% 3 ml inhale orally via nebulizer every 6 hours for COPD Supplementary; Scheduled time: 12:00 p.m.; Administration Time: 1:14 p.m. Review of medication administration report revealed Resident R1 was administered the following medications at times which were not in accordance with physician orders on April 11, 2026 (a.m.): Apixaban Oral Tablet 5 MG (Apixaban) Give 1 tablet by mouth every 12 hours for DVT; Scheduled time: 9:00 a.m.; Administration Time: 11:05 a.m. Fluticasone-Salmeterol 250-50 MCG/ACT Aerosol Powder, breath activated Give 2 puff by mouth two times a day for SOB; Scheduled time: 9:00 a.m.; Administration Time: 11:05 a.m. Mucinex Oral (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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Tablet Extended Release 12 Hour 600 MG (Guaifenesin) Give 1 tablet by mouth every 12 hours for cough for 14 Days; Scheduled time: 9:00 a.m.; Administration Time: 11:05 a.m. Macrobid Oral Capsule 100 MG (Nitrofurantoin Monohyd Macro) Give 1 capsule by mouth every 12 hours for UTI for 5 Days X 5 days; Scheduled time: 9:00 a.m.; Administration Time: 11:05 a.m. Fluticasone Propionate Nasal Suspension 50 MCG/ACT (Fluticasone Propionate (Nasal)) 2 sprays in both nostrils two times a day for seasonal allergies for 30 Days; Scheduled at 9:00 a.m., administered at 11:05 a.m. Interview with Resident R12 on Monday, April 20, 2026, at 10:00 am, indicated that medications were not administered timely on April 15, 2026, April 16, 2026, and April 17, 2026; Resident R12 expressed concerns for late medication administration since (she/he) takes medications for diabetes and heart issues. Review of medication administration audit report revealed Resident R12 had the following medications administered on Wednesday, April 15, 2026: Metoprolol Succinate Extended Release (ER) 25 mg scheduled at 8:00 a.m., administered at 3:21 p.m. Metformin HCL 500 mg, scheduled at 9:00 a.m., administered at 3:33 pm. Provera 10 mg, scheduled at 9:00 a.m., administered at 3:21 pm. Diltiazem HCL ER 120 mg, scheduled at 9:00 a.m., administered at 3:32 p.m. Hydrochlorothiazide 25 mg, scheduled at 9:00 a.m., administered at 3:21 p.m. Losartan Potassium 100 mg, scheduled at 9:00 a.m., administered at 3:21 p.m. Further review of Resident R12 medication administration audit report revealed the following medications were administered on Thursday, April 16, 2026: Metoprolol Succinate ER 25 mg scheduled at 8:00 a.m., administered at 1:25 p.m. Metformin HCL 500 mg, scheduled at 9:00 a.m., administered at 1:25 p.m. Provera 10 mg, scheduled at 9:00 a.m., administered at 1:26 p.m. Diltiazem HCL ER 120 mg, scheduled at 9:00 am, administered at 1:29 pm. Hydrochlorothiazide 25 mg, scheduled at 9:00 a.m., administered at 1:25 p.m. Losartan Potassium 100 mg, scheduled at 9:00 a.m., administered at 1:25 p.m. Further review of Resident R12 medication administration audit report revealed the following medications were administered on Friday, April 17, 2026: Metoprolol Succinate ER 25 mg scheduled at 8:00 a.m., administered at 2:12 p.m. Metformin HCL 500 mg, scheduled at 9:00 a.m., administered at 2:13 p.m. Provera 10 mg, scheduled at 9:00 a.m., administered at 2:13 p.m. Diltiazem HCL ER 120 mg, scheduled at 9:00 a.m., administered at 2:12 p.m. Hydrochlorothiazide 25 mg, scheduled at 9:00 a.m., administered at 2:13 p.m. Losartan Potassium 100 mg, scheduled at 9:00 a.m., administered at 2:13 p.m. Review of medication administration audit report for Resident R13 revealed the following medications were administered on Thursday, April 16, 2026: Amiodarone HCL 200 mg, scheduled at 9:00 a.m., administered at 2:01 p.m. Aspirin 81 mg, scheduled at 9:00 a.m., administered at 1:59 p.m. Magnesium Oxide 400 mg, scheduled at 9:00 a.m., administered at 1:59 p.m. The above findings were confirmed with Facility Nursing Administrator, Employee E1, and assistant Director of nursing, Employee E2, on Monday, April 20, at 2:30 pm. 28 Pa. Code 211.10(c) Resident care policies 28 Pa. Code 211.12(d)(1)(5) Nursing services</p>		