STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395706	A. Building B. Wing	05/27/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Embassy of East Mountain	101 East Mountain Drive Wilkes-Barre, PA 18702

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 0791 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide or obtain dental services for each resident. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of clinical records, select facility policy, payor source data, and resident and staff interview, it was determined the facility failed to ensure timely and necessary dental services for one resident who is a Medicaid recipient (Resident 1) out of 10 residents reviewed. Findings include: Review of the facility Ancillary Services policy last reviewed January 1, 2026, indicated it is the policy of the facility to assist residents in obtaining routine and emergency ancillary services as needed. The policy defined emergency dental services as the need to treat an episode of pain in teeth, gums, or broken, damaged teeth, or any other problem that requires immediate attention by a dentist. A review of Resident 1's clinical record revealed the resident was admitted to the facility on [DATE], with diagnoses that included hydrocephalus (an abnormal buildup of cerebrospinal fluid in the brain's cavities) and weakness. A review of Resident 1's quarterly Minimum Data Set assessment (MDS, a federally mandated standardized assessment process conducted periodically to plan resident care) dated March 30, 2026, revealed that Resident 1 was 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 through 15 indicates no cognitive impairment). During an interview on Wednesday 27, 2026, at 10:30 AM the resident stated she was complaining of mouth pain to the staff for months and did not see the dentist until the tooth was extracted on April 30, 2026, despite the resident expressing pain in the beginning of March. The resident revealed that she currently had no pain but was telling nursing staff and administration for months that she was in pain. A review of an email chain between the facility social services director (SSD) and the dental services care coordinator, revealed an email sent by the facility SSD on March 17, 2026, revealed a request for the resident to be seen by the dentist because of a complaint made to nursing staff for pain in Resident 1's teeth. The email response from the dental services coordinator dated March 16, 2026, confirmed that Resident 1 would be seen by the dentist on March 26, 2026, 10 days after the initial complaint of pain was made. A review of the dental visit on March 26, 2026, revealed the dentist note summary detailed the resident requested two different teeth to be extracted due to plus 2 mobility (Plus 2 mobility in teeth is an abnormal finding caused by advanced gum disease, trauma, or teeth grinding). The visit summary then revealed the dentist would extract the two teeth at the next visit. A review of the continued email communication with the SSD and the dental care coordinator revealed the dental care coordinator emailed the SSD on April 6, 2026, at 8:55AM, requesting the attached consent form be signed by Resident 1 for the planned teeth extraction. The email detailed that the form would need to be completed and signed prior to scheduling the extraction. The SSD responded on April 7, 2026, at 4:50PM, asking how the resident consent would be signed if the resident was unable to physically sign her name due to her physical condition. The Dental care coordinator responded on April 8, 2026, at 8:26AM, confirming that verbal consent was acceptable, and whoever takes the verbal consent would need to sign the form indicating it was a verbal consent, and return to the care coordinator so the resident can be scheduled. A review of the dental care visits provided in the facility revealed the dentist conducted a visit on April 17, 2026, but Resident 1 was not on the schedule due to no consent being obtained. A (continued on next page)

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 0791 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	review of the continued email chain revealed an email sent by the dental care coordinator on April 22, 2026, revealed the resident was scheduled for her teeth extraction on April 30, 2026. An interview with the Nursing Home Administrator (NHA) on May 27, 2026, at 11:30AM, revealed the consent was sent to the dental care coordinator on April 21, 2026, 15 days after the initial request for the consent from the Dental services coordinator. The NHA revealed the SSD was out sick from April 8, 2026, to April 13, 2026, and the reason for the delay in the consent being obtained was because the SSD was out sick. A interview with the NHA on May 27, 2026, at 1:15PM reviewed the above findings of the facility's failure to obtain verbal consent from Resident 1 to ensure prompt extraction of the teeth that were causing Resident 1 pain. The facility failed to provide prompt dental services, as indicated in their facility policy. 28 Pa Code 211.12 (c)(d)(3)(5) Nursing services. 28 Pa Code 211.10 (c) Resident care policies