

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395720	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/21/2025
NAME OF PROVIDER OR SUPPLIER Homestead Village, Inc		STREET ADDRESS, CITY, STATE, ZIP CODE 1800 Village Circle Lancaster, PA 17604	

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 0692</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide enough food/fluids to maintain a resident's health.</p> <p>51168</p> <p>Based on facility policy, clinical record review, and staff interview, it was determined that the facility failed to obtain and monitor weights for one of three residents reviewed for nutrition (Resident 20).</p> <p>Findings include:</p> <p>Review of facility policy, Weight Management/Weight Loss, revised July 12, 2022, revealed that monthly weights will be taken by qualified staff during the first 5 days of each month and documented in the electronic medical record after being verified by licensed staff. If a +/- 5 lb [pound] discrepancy exists, the resident should be reweighed immediately with nurse verifying weight. If unable to verify immediately reweight will be obtained on the following day. Additionally, if a weight loss/gain of 5 or more pounds is noted, dietitian is to be notified in a timely manner for follow up and recommendations.</p> <p>Review of Resident 20's clinical record revealed recorded weights of 121.4 pounds on January 4, 2025; 121.4 pounds on January 5, 2025; 108.4 pounds on February 5, 2025, with a reweight on February 6, 2025, of 107.6 pounds. (loss of 13.8pounds or11.37% in one month)</p> <p>Further review of Resident 20's clinical record revealed a dietary note dated February 10, 2025, indicating the resident's weight. Further review of the same dietary note failed to reveal recommendations to address the weight loss.</p> <p>Interview with Employee E3 on February 21, 2025 at 11:30 a.m. confirmed that further dietary interventions should have been implemented to address Resident 20's weight loss.</p> <p>28 Pa. Code 211.5(f) Clinical Records</p> <p>28 Pa. Code 211.10(c) Resident Care Policies</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing Services</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 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.</p> <p>35913</p> <p>Based upon clinical record review, it was determined the facility failed to ensure monitoring for effectiveness and side effect monitoring for psychotropic medications was completed for one of five residents reviewed (Resident 6).</p> <p>Findings include:</p> <p>Review of Resident 6's clinical record revealed Resident 6 had been receiving Trazodone (anti-depressant medication) for insomnia since March 2024.</p> <p>Further review of Resident 6's clinical record failed to reveal evidence of monitoring for side effects and/or effectiveness of Trazodone since the medication was initiated in March 2024.</p> <p>Interview with the Director of Nursing on February 21, 2025, at 10:00 a.m. confirmed that no monitoring for side effects or effectiveness was documented since March 2024 to present when Resident 6 was receiving Trazodone.</p> <p>28 Pa. Code 211.12(d)(1)(2)(3) Nursing Services</p> <p>Previously cited 3/1/2024</p>		