

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 03/05/2026
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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of facility policy, resident records, and staff interview it was determined that the facility failed to follow transmission-based precautions and utilize enhanced barrier precautions (EBP) during wound care creating the potential for cross contamination for two out of three sampled residents (Residents R29 and R32). Findings include: Review of facility policy Transmission-Based Precautions & MDRO last revised June 2024, states Enhanced Barrier Precautions (EBP) are used for reducing transmission of multidrug-resistant organisms (MDROs) during high-contact resident care activities in residents with chronic wounds (e.g. pressure, diabetic, unhealed surgical, and venous stasis) and/or indwelling medical devices. Further review of the policy indicated that enhanced barrier precaution needs to be implemented during high contact resident care activities, such as dressing changes to wounds.</p> <p>Review of Resident R29's admission record indicated he/she was originally admitted on [DATE].</p> <p>Review of Resident R29's MDS assessment (MDS: Minimum Data Set assessment-a periodic assessment of resident care needs) dated 3/20/25, indicated she had diagnoses that included Alzheimer's disease, venous insufficiency, localized edema, non-pressure chronic ulcer on the right foot.</p> <p>Review of Resident R29's clinical record revealed an active order for Lymphademic (issue swelling caused by an accumulation of protein-rich fluid that's usually drained through the body's lymphatic system) wound left 3rd toe: Cleanse with NSS (normal saline solution). Apply Betadine daily and as needed. Leave open to air. With a start date of February 27, 2026.</p> <p>Observation conducted of Resident R29's room on March 3, 2026, at 10:12 a.m. revealed personal protective equipment (PPE) hanging on the resident's dresser located next to the bed.</p> <p>Review of Resident R29's care plan revealed the following intervention: Enhanced Barrier Precautions due to open wound per protocol.</p> <p>During an interview with the Director of Nursing (DON) on March 4, 2026, wound treatment observation for Resident R29 was scheduled for March 5, 2026, at 9:00 a.m.</p> <p>Observation of wound treatment conducted on March 5, 2026, at 9:10 a.m. revealed licensed staff employee E3 performing wound care for Resident R29 while wearing gloves only and not wearing a protective gown.</p> <p>Upon completion of the wound treatment, interview with licensed staff employee E3 confirmed that Resident R29 was on Enhanced Barrier Precautions due to wounds and that appropriate PPE for (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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>wound care should have included gloves and a protective gown.</p> <p>Interview conducted with the Infection Preventionist, licensed employee E4, on March 5, 2026, at 10:37 a.m. confirmed that licensed employee E3 did not wear the appropriate PPE during the wound care treatment.</p> <p>During an interview conducted on March 5, 2026, at 1:30 p.m., the Director of Nursing (DON) and Nursing Home Administrator (NHA) were informed of observations indicating the facility failed to follow transmission-based precautions and implement Enhanced Barrier Precautions (EBP) in accordance with the resident's care plan and infection prevention protocols. This deficient practice had the potential to result in cross-contamination and place Residents R29 and R32 at risk for the transmission of infectious organisms.</p> <p>Review of Resident 32's clinical record revealed Resident 32 was admitted to the facility on [DATE].</p> <p>Further review of Resident 32's clinical record revealed Resident 32 had a sacral pressure ulcer.</p> <p>Observation of wound treatment conducted on March 5, 2026, at 9:12 a.m. revealed Licensed Employee E5 performing wound care for Resident 32.</p> <p>Further observation of the wound treatment failed to reveal evidence that Licensed Employee E5 was wearing appropriate personal protective equipment (PPE) during the wound care treatment.</p> <p>Interview with Licensed Employee E4 on March 5, 2026, at 10:37 a.m. confirmed that Licensed Employee E5 was not wearing the appropriate PPE during the wound treatment and further confirmed Licensed Employee E5 failed to follow transmission-based precautions during the wound treatment.</p> <p>28 Pa Code: 201.14 (a) Responsibility of licensee.</p> <p>28 Pa Code: 201.28 (b)(1)(e)(1) Management.</p> <p>28 Pa Code: 211.10 (d) Resident care policies.</p>		