

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395780	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/18/2025
NAME OF PROVIDER OR SUPPLIER Fair Acres Geriatric Center		STREET ADDRESS, CITY, STATE, ZIP CODE 340 N. Middletown Road Lima, PA 19037	

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 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>Based on review of clinical records, facility documentation, resident council minutes, facility policies, and interviews with residents and staff, it was determined that the facility failed to demonstrate evidence that residents are educated on filing grievances and that grievances forms/ boxes were available and accessible for residents on nursing units for five of 5 floors reviewed (Building 8, Floor 3, 4, 5, 6 and 10). Review of facility policy titled Code of Corporate Compliance revealed that Residents are treated in a manner that preserves dignity, autonomy, self-esteem, civil rights and involvement in their own care. Fair Acres Geriatric Center employees receive training about resident rights to clearly understand their role in supporting them. Observation of Building 8, 3rd floor, revealed no grievance forms or boxes available and accessible for residents on nursing unit. Interview with Employee E3, Licensed Practical Nurse, on July 18, 2025 at 10:45 am revealed that there are no grievance forms available and if resident would like to make a complaint they call the phone number posted on the wall. Interview with Employee E4, Unit Secretary, on July 18, 2025 at 10:48am revealed there were no grievance forms available behind the nursing station. Observation of Building 8, 4th floor, revealed no grievance forms or boxes available and accessible for residents on nursing unit. Interview with Employee E5, Unit Manager/ Licensed Practical Nurse, on July 18, 2025 at 10:54am revealed that if residents would like to place a grievance we could give them a blank envelope and they could place it in the facility internal mailbox. Confirmed no grievance forms/ drop box available on unit. Observation of Building 8, 5th floor, revealed no grievance forms or boxes available and accessible for residents on nursing unit. Interview with Employee E7, Licensed Practical Nurse, on July 18, 2025 at 11:05am confirmed no grievance forms/ drop box available on unit. Employee stated If resident has a complaint or concern they would report it to the unit manager. Observation of Building 8, 6th floor, revealed no grievance forms or boxes available and accessible for residents on nursing unit. Interview with Employee E8, Registered Nurse, confirmed no grievance forms or boxes available and accessible for residents on nursing unit. Observation of Building 8, 10th floor, revealed no grievance forms or boxes available and accessible for residents on nursing unit. Interview with Employee E12, Licensed Practical Nurse, confirmed no grievance forms or boxes available and accessible for residents on nursing unit. Observation of Building 8, main lobby, revealed complaint box on receptionist desk. Interview with Employee E13, Utility aide, confirmed no grievance forms available. Residents would just write on a plain piece of paper and put it in the box if they have a complaint. Interview with Employee E1, Director of Nursing confirmed facility has no grievance policy. If residents want to file a grievance then they would either write on a plain piece of paper and drop it in the main lobby complaint box or would call the phone number listed on the Nursing Unit. Review of Resident council minutes dated May 14, 2025 and June 11, 2025 revealed no discussions/ education on the topic of filing a grievance. 28 Pa. Code 201.29(a) Resident rights</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID: Facility ID: 395780	If continuation sheet Page 1 of 1