

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 07/18/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395795	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/12/2025
NAME OF PROVIDER OR SUPPLIER Lafayette Manor, Inc		STREET ADDRESS, CITY, STATE, ZIP CODE 147 Lafayette Manor Road Uniontown, PA 15401	
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 0558 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Reasonably accommodate the needs and preferences of each resident. Based on observations, review of clinical records, and staff interview it was determined that the facility failed to provide reasonable accommodation of needs for five of 25 residents reviewed (Resident R1, R2, R3, R4 and R5). Based on observations, review of clinical records, and staff interview it was determined that the facility failed to provide reasonable accommodation of needs for five of 25 residents reviewed (Resident R1, R2, R3, R4 and R5). Findings Include: During observations of resident rooms on the first and second floors on 8/12/25, from 9:40 a.m., through 11:45 a.m., incontinence diapers were being placed in rooms. During an interview on 8/12/25, at 10:22 a.m., Licensed Practical Nurse (LPN) Employees E1 and E2 confirmed that the facility only allows eight incontinence diapers per resident, and they were told they are not to get any more, if they run out, they have to wait for the Supervisor to get them. Staff stated, residents are to be changed every two hours, we need 12 then at least and what happens if the resident goes through more because of diarrhea? During an interview on 8/12/25, at 10:42 a.m., Nurse Aide (NA) Employee E4 stated that you only have eight incontinence diapers for each resident. During an interview on 8/12/25, at 11:10 NA Employees E5 and E8 stated that the facility only allows eight incontinence diapers per resident, and we used to be able to get more now you have to hunt down the Supervisor to get them or you get into trouble. During an interview on 8/12/25, at 11:20 a.m., NA Employees E7 and E9 stated that they the facility does not allow no more than eight incontinence diapers for each resident in 24 hours. There are no wipes and washcloths are used and at times the washcloths don't look clean and we're using a rag that may have been used on someone's behind now using it on a resident's face. During an interview on 8/12/25, at 11:35 a.m., Housekeeper/central/custodian Employee E11 stated that places the supplies of diapers in each resident room, if there are four, I put in four more, the extra-large users only get four at a time. During an interview on 8/12/25, at 11:40 a.m., LPN Employee E7 and NA Employee E9 stated Resident R6 has small diapers in her room but requires extra-large, when observed, there were four small diapers in her drawer. Review of Resident R5's clinical record indicated her weight as being 169 pounds, incontinence of bowel and bladder and recently having a healed pressure ulcer of her sacrum that started as shearing and had developed and worsened while in the facility. On 8/12/25, she had developed a urinary tract infection. Review of the facility pressure ulcer list indicated four residents (Residents R1, R2, R3 and R4) with Incontinence Associated Dermatitis and staged as partial thickness and all developing in the facility. During an interview on 8/12/25, at 11:45 a.m., the Nursing Home Administrator confirmed that the facility failed provide reasonable accommodation of needs for five of 25 residents reviewed (Resident R1, R2, R3, R4 and R5). 28 Pa. Code 201.29 (a) Resident Rights. 28 Pa. Code 211.10 (d) Resident care policies.		

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 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. Based on observations, review of facility policy, resident, and staff interviews, it was determined that the facility failed to provide a safe, clean, comfortable, and homelike environment on two of two nursing units (First and Second Floor Nursing Units). Based on observations, review of facility policy, resident, and staff interviews, it was determined that the facility failed to provide a safe, clean, comfortable, and homelike environment on two of two nursing units (First and Second Floor Nursing Units). Findings included: Review of the facility policy Homelike Environment dated 1/28/25, indicated in part The facility staff and management maximizes, to the extent possible, the characteristics of the facility that reflect a personalized, homelike setting. These characteristics include clean bed and bath linens that are in good condition. Review of Title 42 Code of Federal Regulations S483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable, and homelike environment, including but not limited to receiving treatment and supports for daily living safely. S483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior. During an observation on 8/12/25, from 9:40 a.m., through 11:20 a.m., of the first floor nursing unit identified: Observation of the linen carts identified torn towels and bed blankets and ripped washcloths being provided from laundry as washcloths. During an interview on 8/12/25, at 10:22 a.m., Licensed Practical Nurses E1 and E2 confirmed that the facility utilizes torn towels, blankets and ripped washcloths to clean residents for washcloths due to not having wipes and the only wash cloths being provided. During an interview on 8/12/25, at 11:20 a.m., Nurse Aide Employees E7 and E8 stated that they use the ripped washcloths and pieces of blankets and towels as washcloths and that is what facility provides. During an interview on 8/12/25, at 11:22 a.m., Maintenance Director Employee E3 stated that those were being provided as washcloths. Stated the facility has new washcloths and showed them to the surveyor still packaged. During an interview on 8/12/25, at 11:30 a.m., the Nursing Home Administrator confirmed the ripped washcloths and torn blankets and towels were what was being provided. The facility failed to provide a safe, comfortable and homelike environment for the residents of the first and second floor nursing units. 28 Pa. Code: 207.2(a) Administrator's responsibility. 28 Pa. Code: 201.29(k) Resident rights.		