

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395819	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/25/2024
NAME OF PROVIDER OR SUPPLIER Caring Heart Rehabilitation and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 6445 Germantown Avenue Philadelphia, PA 19119	

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 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that residents are fully informed and understand their health status, care and treatments.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38947</p> <p>Based on staff interview, review of facility policy and the review of clinical records, it was determined that the facility failed to ensure that a resident's responsible party had the right to be notified of the resident's change in treatment for one out of two residents reviewed (Resident R1).</p> <p>Findings include:</p> <p>Review of the facility's policy, Notification of Change in Condition, with a revision date of April 1, 2021 reported that the facility must inform the resident, consult with the resident's physician and/or notify the resident's family member or legal representative when there is a change requiring notification such as, but not limited to: accidents resulting in injury, significant change in the resident's physical mental or psychosocial condition, and circumstances that require a need to alter the resident's treatment (e.g. a new treatment of the discontinuation of a treatment).</p> <p>Review of the September 2024 physician orders indicated that the resident was admitted into the facility on [DATE] with diagnosis that included the following: hypertension (high blood pressure); dementia (a group of symptoms affecting an individual's memory, thinking and social abilities); cerebral infarction (a stroke), and muscle weakness.</p> <p>Review of the resident's Admission Minimum Data Set Assessment (MDS- a periodic assessment of a resident's needs) completed on August 18, 2024 indicated that the resident was cognitively impaired.</p> <p>During an interview with the resident's daughter on September 25, 2024 at 11:43 a.m. the resident's daughter reported that on August 17, 2024 she came into the facility at approximately 1:00 p.m. and noticed that her mother was utilizing oxygen, and that she had a COVID sign on her door. The daughter reported that she went to the nursing station and was notified that her mother tested positive for COVID.</p> <p>During an interview with the nursing supervisor (Employee E6) on September 25, 2024 at 4:19 p.m. the nursing supervisor reported that he spoke with the resident's daughter over the phone, notified her of the COVID diagnosis on August 17, 2023, and the oxygen use, but that he did not write note.</p> <p>Review of the resident's nursing notes dated August 17, 2024 at 10:00 a.m. documented</p> <p>(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 0552</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>' .tested positive for COVID today. No s/s of distress noted. Continued review of the nursing notes and clinical record did not produce any evidence that the resident's daughter was notified of the COVID diagnosis and that the resident required oxygen treatments.</p> <p>Continued interview with the resident's daughter on September 25, 2024 at 6:00 p.m. indicated that she did not speak with anyone over the phone regarding her mother's COVID diagnosis or the use of oxygen and that as reported, she found out about this when she came into the facility on [DATE] and noticed the sign and her mother using oxygen.</p> <p>The facility failed to ensure that Resident R1's responsible party had the right to be notified of the resident's change in treatment.</p> <p>28 Pa Code 201.18 (b)(1) Management</p> <p>28 Pa. Code 211.10 (c) Resident care policies</p> <p>28 Pa. Code 211.12 (c)(d)(1)(3) Nursing services</p>		

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<p>F 0553</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Allow resident to participate in the development and implementation of his or her person-centered plan of care.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38947</p> <p>Based on staff and resident interview and review of clinical records, it was determined that the facility failed to ensure that advanced notice was provided for participation in a care plan meeting for one out of two resident's reviewed (Resident R1).</p> <p>Findings include:</p> <p>Review of the September 2024 physician orders indicated that the resident was admitted into the facility on [DATE] with diagnosis that included the following: hypertension (high blood pressure); dementia (a group of symptoms affecting an individual's memory, thinking and social abilities); cerebral infarction (a stroke), and muscle weakness.</p> <p>Review of the resident Admission Minimum Data Set Assessment (MDS- a periodic assessment of a resident's needs) completed on August 18, 2024 indicated that the resident was cognitively impaired.</p> <p>During an interview with the resident's daughter on September 25, 2024 at 11:43 a.m. the resident's daughter reported that she reached out to the facility social worker (Employee E3) on August 25, 2024 to find out the date of her mother's care plan meeting and the process for care plan meetings. She reported that the social worker told her that she did not know. The resident's daughter reported that she did not receive any following up from the Nursing Home Administrator (NHA) regarding this. The daughter reported that she received a call on August 27, 2024 from the social worker informing her that she was calling to have the resident' scare plan meeting on the referenced day (August 27, 2024), and that she received notification of the meeting when she got the call for the meeting.</p> <p>Review of the clinical record did not show evidence that the facility provided any advanced written or verbal notification of the resident's care plan meeting to the resident daughter prior to the call that the daughter received on August 27, 2024.</p> <p>During an interview with the social worker on September 25, 2024, the social worker reported that resident's care plan meeting was held on August 27, 2024. The social worker reported that she spoke with the resident's daughter a few days before the care plan meeting to notify her of the date and time. It was confirmed during the above referenced interview that no evidence of written documentation could be provided to show that the resident's daughter received advanced notification from the social services department that the care plan meeting was scheduled for August 27, 2024.</p> <p>28 Pa Code 211.10(c) Resident care policies</p> <p>28 Pa Code 211.10(d) Resident care policies</p> <p>28 Pa Code 211.11(d) Resident care plan</p> <p>28 Pa. Code 211.12(c)(1))Nursing services</p> <p>28 Pa. Code 211.12(d)(1) Nursing services</p> <p>(continued on next page)</p>		

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F 0553 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	28 Pa. Code 211.12(d)(5) Nursing services

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<p>F 0559</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 share a room with spouse or roommate of choice and receive written notice before a change is made.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38947</p> <p>Based on staff interviews and the review of the clinical record, it was determined that the facility failed to ensure that notification was provided to a resident and his/her responsible party prior to a room change for one of two residents reviewed (Resident R1).</p> <p>Findings include:</p> <p>Review of the facility, Change or Room or Roommate dated January 2024 indicated that it is the facility's policy to conduct changes to room and/or roommate assignments when considered necessary and/or when requested by the resident or resident representative. The policy also indicated that request for room change, all persons involved in the change/assignment, such as residents and their representatives will be given advanced notice of such a change, as is possible and that the social services designee or licensed nurse should inform the resident's sponsor/family of the room change in advance of a change in the resident's room/roommate Continued review of the policy indicated that the notice of change in room of roommate will be provided in writing, in language manner the resident and representative understand and will include the reason(s) why the move or change in required.</p> <p>Review of the policy also indicated that social service staff can assist the resident to adjust to the new room or roommate by doing the following, which includes, but not limited to, informing the resident and family as soon as possible; allowing the resident to ask questions about the room; show the resident where the room is located and introduce the resident to his/her new roommate. The policy also stated that the resident has the right to refuse to transfer to another room within the facility if the purpose of the transfer is to relocated a resident from due to a change in the resident's payor source.</p> <p>Review of the September 2024 physician orders indicated that the resident was admitted into the facility on [DATE] with diagnosis that included the following: hypertension (high blood pressure); dementia (a group of symptoms affecting an individual's memory, thinking and social abilities); cerebral infarction (a stroke), and muscle weakness.</p> <p>During an interview with the resident's daughter on September 25, 2024 at 11:43 a.m. the daughter reported that she came into the facility on [DATE] to visit her mother, went to her mother's room that was located on the 2nd floor, and did not find her in there. Continued interview with the resident's daughter indicated that the daughter went to the nurse on the 2nd floor and inquired as to where her mother was. The resident's daughter reported that the nurse told her that resident was moved to the long-term care floor, which the resident's daughter reported was on he 4th floor.</p> <p>Review of the clinical record for Resident R1 did not show any documentation that the resident and/or her responsible party was sent any written notice about the room change, including the reason why the room change was being made prior to moving Resident R1</p> <p>(continued on next page)</p>		

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<p>F 0559</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview with the facility's social worker (Employee E3) on September 25, 2024 at 1:30 p.m., the social worker reported that the resident was moved to the floor designated to long-term care resident (4th floor) on September 20, 2024, and that the resident was moved to another floor because during the care plan meeting that took place on August 25, 2024 the resident's 2 daughters who were in attendance reported that Resident R1 would be a long-term care resident at the facility. The social worker reported when asked, that there was no written notification provided to the resident's daughters prior to the room change that took place on September 20, 2024.</p> <p>The facility failed to ensure that written notification was provided to Resident R1 and /or her responsible parties prior to a room change that took place on September 20, 2024.</p> <p>28 Pa. Code 201.14(a) Responsibility of licensee</p> <p>29 Pa. Code 201.29(d) Resident rights</p> <p>29 Pa. Code 201.29(j) Resident rights</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38947</p> <p>Based on observations, staff interviews, and the review of clinical records, it was determined that the facility failed to ensure that a complete and thorough investigation was completed in a timely manner to rule out abuse/neglect for one out of three residents reviewed (Resident R1).</p> <p>Findings include:</p> <p>Review of the facility policy Abuse, revised November 20, 2020 indicated under the Identification section of the abuse policy that staff receives education about the behavioral and situational signals that may indicate risk for or the presence of abuse, neglect or misappropriate of property. The Identification section also included signs and symptoms of abuse that may possibly indicate presence of which attention will be given to, include, a resident having bruises, cuts, the appearance of dehydration, the appearance of feeling anxious, afraid, confused, depressed. The policy also highlighted that other signs and symptom that may possibly indicate the presence of abuse, that attention will be given to included someone in contact with the resident might neglect to provide the medication or access to proper medical care, or not keep the resident properly dressed or clean.</p> <p>Review of the September 2024 physician orders indicated that the resident was admitted into the facility on [DATE] with diagnosis that included the following: hypertension (high blood pressure); dementia (a group of symptoms affecting an individual's memory, thinking and social abilities); cerebral infarction (a stroke), and muscle weakness.</p> <p>Review of the resident's Admission Minimum Data Set Assessment (MDS- a periodic assessment of a resident's needs) completed on August 18, 2024 indicated that the resident was cognitively impaired.</p> <p>Review of the resident's person-centered plan of care dated September 13, 2024, included a plan of care related to the resident's limited mobility of activities of daily living related to transfers and toileting. The care plan indicated that the resident required the assistance of 1 staff member when using the toilet, and that the resident required the assistance of 1 staff member for transfers (the ability to move from one position to another such as from a bed to a wheelchair).</p> <p>(continued on next page)</p>

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview with the resident's daughter on September 25, 2024 at 11:43 a.m. the resident's daughter reported that she visit her mother on September 13, 2024 on or around 4:00 p.m. and that she noticed that her mother had the same gown on that she had on when she previously visited her mother the day before after she got off work. The daughter reported that she also noticed that the gown was covered in feces. The daughter reported that she went to the nursing station and asked who the aide was, and was reported the nurse aide (Employee E4, 7:00 a.m. through 3:00 p.m.) left for the day. The daughter reported that she spoke to her mother's current nurse aide (Employee E5) who reported to her that Employee E4, left your mother and other residents on the floor a mess. Continued interview with the daughter indicated that the daughter went to the nursing supervisor #1 (Employee E6), informed him of her observation of her mother when she came to visit. The daughter reported that the nursing supervisor provided her with a grievance form to complete. The resident's daughter reported that when she finished with the grievance form she returned it to the charge nurse, who she observed post the grievance up on the board at the nurses station using a push pin. Resident R1's daughter reported that when she returned to visit her mother the following day (September 14, 2024 Saturday), she saw the grievance form still posted in the same place, so she went to the charge nurse (Employee E7) and inquired about the grievance that was still on the board. The daughter reported that on or around September 18, 2024, she received a call from nursing supervisor #2 (Employee E8) who reported that he was notified by</p> <p>Employee E7 about her grievance and informed her that he was calling her to obtain more information regarding the grievance that she had related to her mother's care. The daughter reported that she provided the nursing supervisor with the information, and has not heard anything back from him or anyone else at the facility regarding the concern that she reported to the nursing supervisor (Employee E6) on September 13, 2024.</p> <p>During an interview with nursing supervisor #1 on September 26, 2024, at 4:19 p.m. he reported that the resident's daughter reported to him on September 13, 2024 that she found her mother soiled when she came into visit. Nursing supervisor #1 reported that he gave the resident's daughter a grievance form to fill out, but that he did not get the grievance back from the daughter.</p> <p>During an interview with nursing supervisor #2 on September 26, 2024 at 3:30 p.m., nursing supervisor #2 reported that he was notified by Employee E7 on September 19, 2024 that the resident's daughter had a concern about her loved one being left soiled. Nursing supervisor #2 reported that he contacted the resident's daughter regarding her grievance, and drafted up a grievance for her during the call. Nursing supervisor that the resident's daughter mentioned the name of the nurse aide during their conversation (Employee E4) who reportedly left Resident R1 soiled. Nursing supervisor #2 reported on September 26, 2024 during the interview, that he did interview the nurse aide (Employee E4) who reported to him that she provided care to the resident, and explained that he was still investigating the grievance that he received on September 19, 2024 regarding the daughter's concern that her mother was left soiled by Employee E4, and that the investigation was not yet completed.</p> <p>Interviews indicated that the facility did not ensure that a complete and thorough investigation to rule out potential abuse/neglectful actions when the verbal concern that the resident's being left soiled by the nurse aide was initially brought to the attention of the nursing supervisor #1 on September 13, 2024, and then brought to the attention of nursing supervisor #2 on September 19, 2024.</p> <p>The facility failed to ensure that a complete and through investigation was completed in a timely manner to rule out abuse/neglect for Resident R1.</p> <p>(continued on next page)</p>		

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