

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  395907	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  09/06/2024
NAME OF PROVIDER OR SUPPLIER  Forestview		STREET ADDRESS, CITY, STATE, ZIP CODE 2301 Edinboro Road Erie, PA 16509	
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 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide safe and appropriate respiratory care for a resident when needed.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40177</b></p> <p>Based on review of facility policy and clinical records, observations, and staff interview, it was determined that the facility failed to maintain proper care of respiratory equipment for one of two residents reviewed for respiratory services (Resident R13).</p> <p>Findings include:</p> <p>Review of facility policy dated 1/11/24, entitled Oxygen Therapy under Storage and Cleaning indicated Check humidifier each shift. Change bottle when water level is low or weekly. Date and initial bottle. Policy also indicated to Remove re-usable oxygen concentrator filter weekly and replace with clean, dry filter. Wash removed filter with water, dry and store in specific location.</p> <p>Resident R13's clinical record revealed an admitted [DATE], with diagnoses that included chronic obstructive pulmonary disease (COPD - a lung disease that results in difficulty breathing, cough, and mucus production), high blood pressure, and dementia (loss of cognitive functioning affecting a persons memory and behaviors).</p> <p>Resident R13's nurse aide (NA) tasks initiated 8/08/24, revealed NA will replace oxygen tubing and canister (humidifier bottle) weekly. Further review of Resident R13's clinical record lacked evidence of instructions or care related to oxygen concentrator filters.</p> <p>Observation on 9/03/24, at approximately 2:20 p.m. and again on 9/04/24, at approximately 11:45 a.m. revealed that Resident R13's oxygen concentrator contained a humidifier bottle attached to the concentrator dated for 8/19/24, and two filters (one on each side of the concentrator) that contained a gray dusty substance.</p> <p>During an interview on 9/04/24, at approximately 11:51 a.m. Licensed Practical Nurse Employee E1 confirmed that the oxygen concentrator humidifier bottle was dated for 8/19/24, but he/she was not sure how often it was to be changed and both filters contained a gray dusty substance and should not have that appearance.</p> <p>During an interview on 9/04/24, at approximately 2:51 p.m. Director of Nursing confirmed that the humidifier bottles are to be changed on a weekly basis.</p> <p>28 Pa. Code 211.12(d)(1)(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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 395907
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0758</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</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><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 40177</p> <p>Based on review of clinical records and staff interview, it was determined that the facility failed to provide evidence that non-pharmacological interventions (interventions attempted to calm a resident other than medication) were attempted prior to the administration of a PRN (as needed) psychotropic (affecting the mind) medication for one of six residents reviewed for unnecessary medications (Resident R13).</p> <p>Findings include:</p> <p>Resident R13's clinical record revealed an admitted [DATE] with diagnoses that included chronic obstructive pulmonary disease (COPD - a lung disease that results in difficulty breathing, cough, and mucus production), high blood pressure, and dementia (loss of cognitive functioning affecting a persons memory and behaviors).</p> <p>Resident R13's clinical record revealed physician's order dated 7/30/24, that identified to administer Lorazepam (anti-anxiety medication) Oral Concentrate 2 milligram (mg) per milliliter (ml). Give 0.25 ml by mouth every two hours as needed (PRN) for anxiety for 14-days. A physician's order dated 8/13/24, identified to administer Lorazepam Oral Concentrate 2mg/ml. Give 0.25 ml by mouth every two hours PRN for anxiety for 14-days. A physician's order dated 8/27/24, identified to administer Lorazepam Oral Concentrate 2mg/ml. Give 0.25 ml by mouth every two hours PRN for anxiety for 14-days.</p> <p>Resident R13's August 2024 Medication Administration Record (MAR) revealed that the PRN Lorazepam was used three times (8/10/24, 8/24/24, and 8/29/24). Review of the August MAR and clinical record progress notes revealed that there was no evidence of non-pharmacological interventions being attempted prior to the administration of the PRN Lorazepam two of the three times it was used.</p> <p>Resident R13's September 2024 MAR revealed that the PRN Lorazepam was used two times (9/02/24 twice). Review of September MAR and clinical record progress notes revealed that there was no evidence of non-pharmacological interventions being attempted prior to the administration of the PRN Lorazepam two of the two times it was used.</p> <p>During an interview on 9/05/24, at 1:45 p.m., the Director of Nursing confirmed that Resident R13's clinical record lacked evidence that non-pharmacological interventions were being attempted prior to the administration of a PRN anti-anxiety medication for each time it was administered.</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing services</p>		