

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395950	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/31/2024
NAME OF PROVIDER OR SUPPLIER Centennial Healthcare and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 4400 West Girard Avenue Philadelphia, PA 19104	

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 0623</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Some</p> <p>Note: The nursing home is disputing this citation.</p>	<p>Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.</p> <p>46993</p> <p>Based on review of facility provided documentation and interview with staff, it was determined that the facility failed to notify the Office of the State Long - Term Care Ombudsman of initiated emergency transfers and discharges for two out of three months reviewed (July 2024/August 2024)</p> <p>Findings include:</p> <p>Upon request, facility provided list of involuntary discharges and transfer notices for months of July 2024, August 2024 and September 2024; indicating that lists have been sent via fax to local ombudsman.</p> <p>Review of facility provided documentation revealed e-mail communication between facility's social worker, employee E3, local ombudsman, and state ombudsman, dated October 17, 2024 at 2:17 p.m. clarifying that discharge notices are to be sent to State long - term care ombudsman and that currently the State ombudsman can only record September and October notices at this point . anything earlier, there's not much we can do for the resident.</p> <p>Interview with facility's Social Worker, Employee E3, on October 30, 2024 at 9:15 a.m., confirmed the above findings.</p> <p>28 Pa Code 201.14(a) Responsibility of licensee</p> <p>28 Pa Code 201.18(b)(2) Management</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 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46993</p> <p>Based on review of clinical records, interview with staff and review of facility policy, it was revealed that the facility did not ensure revision were made to the PASRR (Pre-Admission Screening and Resident Review) application to include mental health diagnoses for four out of 34 residents reviewed. (Resident R62, R88, R26, R23)</p> <p>Findings include:</p> <p>Review of the undated facility policy titled PASSR policy and procedure revealed that all residents regardless of payer source would have a PASSR form completed. The policy indicated that any resident with mental health disorder would have a complete and accurate PASSR done and referral made for a level II PASSAR, if necessary. The policy also indicated that all residents with newly evident serious mental health disorder, intellectual disability, or a related condition with a significant change in status were required to have a PASSR completed and screening done. The policy indicated that this screening would determine the PASSR level II documentation and screening, if necessary.</p> <p>Review of Resident R62's PASRR completed on September 29, 2021, indicated that Resident R62 did not have a mental health condition or suspected mental health condition, other than dementia, that may lead to a chronic disability.</p> <p>Review of R62's clinical record revealed admitted [DATE]. Clinical record review for Resident R62 revealed that the resident developed a medical diagnosis during the nursing home stay of delusional disorder, anxiety disorder and major depressive disorder, May 27, 2024.</p> <p>Review of Resident R88's PASRR completed on July 3, 2017, indicated that Resident R88 did not have a mental health condition or suspected mental health condition, other than dementia, that may lead to a chronic disability.</p> <p>Review of R88's clinical record revealed admitted [DATE]. Clinical record review for Resident R88 revealed that the resident developed medical diagnoses during the nursing home stay of delusional disorder on June 8, 2024.</p> <p>Review of Resident R26's PASRR completed on January 24, 2019, indicated that Resident R26 did not have a mental health condition or suspected mental health condition, other than dementia, that may lead to a chronic disability.</p> <p>Review of R26's clinical record revealed admitted [DATE]. Clinical record review for Resident R26 revealed that the resident developed medical diagnoses during the nursing home stay of bipolar disorder on April 16, 2019, mood disturbance on February 8, 2019, major depressive disorder on June 8, 2024 and anxiety disorder on June 8, 2024.</p> <p>Review of Resident R23's PASRR completed on January 2, 2009, indicated that Resident R23 did not have a mental health condition or suspected mental health condition, other than dementia, that may lead to a chronic disability.</p> <p>(continued on next page)</p>

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<p>F 0644</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of R23's clinical record revealed admitted [DATE]. Clinical record review for Resident R236 revealed that the resident developed medical diagnoses during the nursing home stay of anxiety disorder on March 25, 2024, delusional disorder on March 25, 2024 and major depressive disorder on March 25, 2024.</p> <p>Interview with the facility administrator, Employee E1 at 10:30 a.m., on October 31, 2024 confirmed that the PASSR forms for Residents: R62, R88, R26 and R23 lacked complete and documentation and were not reflective of each resident's current mental health conditions.</p> <p>28 PA Code 211.10 (c) Resident Care Policies</p> <p>28 PA Code 211.5(f)(ii)(iv)(vi)(ix) Medical records</p>		

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<p>F 0645</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>PASARR screening for Mental disorders or Intellectual Disabilities</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39343</p> <p>Based on clinical record review and staff interview, it was determined that the PASRR-ID (Preadmission Screening and Resident Review Identification) was not appropriately completed for one of 34 residents reviewed (Resident R2).</p> <p>Findings include:</p> <p>The PASRR (Preadmission Screening Resident Review) was created in 1987 through language in the Omnibus Budget Reconciliation Act (OBRA) and it has three goals: to identify individuals with mental illness and/or intellectual disability, to ensure they are placed appropriately, whether in the community or in a nursing facility, and to ensure they receive the services they require for their mental illness or intellectual disability. The PASRR Level 1 must be completed on all persons who are considering admission to a Medicaid certified nursing facility.</p> <p>Review of Resident R2's clinical record revealed the resident was admitted to the facility on [DATE], with diagnoses including Psychosis (Psychosis is a set of symptoms that cause a person to lose touch with reality, and have difficulty distinguishing what is real and what is not. It can affect people in different ways, and can include Hallucinations: Seeing, hearing, feeling, tasting, or smelling things that aren't there; Delusions: believing things that are untrue, such as thinking someone is trying to harm you; disordered thinking or speaking: speaking quickly or constantly, or switching topics mid-sentence; Cognitive symptoms: difficulty with attention, concentration, and memory; mood changes: suicidal thoughts or behaviors).</p> <p>Review of Resident R2's Pennsylvania Preadmission Screening Resident Review Identification Level I Form (PASRR) which was completed on August 24, 2018. Review of PASRR of R2 indicated; in the Section III A (does the individual have a mental disorder or suspected mental disorder, other than Dementia, that may lead to chronic disability), no Diagnosis was marked, even though R2 was diagnosed with Psychosis. Review of PASRR of R2 also indicated for Section VIII- PASRR LEVEL I Screening Outcome, R2 was not checked off for the outcomes that may or may not lead to chronic disability.</p> <p>Interview on October 28, 2024, at 11:48 a.m., with the Director of Nursing, confirmed the finding.</p> <p>28 Pa Code 211.5(f) Clinical records</p> <p>28 Pa Code 211.16(a) Social services</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39343</p> <p>Based on observations, reviews of resident clinical records, facility policies and procedures, and interviews with staff and residents, it was determined that the facility failed to follow physician orders for one out of 34 residents reviewed. (Resident R122)</p> <p>Findings include:</p> <p>Review of Resident R122's clinical record revealed that the resident was admitted to the facility on [DATE], with diagnosis of Acquired Absence of Left Leg Below Knee, and Encounter for Orthopedic Aftercare Following Surgical Amputation.</p> <p>Review of physician order dated January 22, 2024, for Resident R122, revealed an order; patient to wear bilateral shrinker on bilateral lower extremities at all times with exception of self-care/skin checks.</p> <p>On October 30, 2024, at 10:07 a.m., it was observed that Resident R122 had not been administered with bilateral shrinker on bilateral lower extremities at all times with exception of self-care/skin checks.</p> <p>Interview with the Licensed Nurse, Employee E12, at the time of the findings confirmed the observations.</p> <p>28 Pa. Code 211.10(c) Resident care policies</p> <p>28 Pa. Code 211.12(d)(1) Nursing services</p>

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<p>F 0732</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Post nurse staffing information every day.</p> <p>46993</p> <p>Based on observations and interviews with facility staff, it was determined that he facility did not ensure to accurately post information regarding daily nurse staffing data as required.</p> <p>Findings include:</p> <p>Observations of posted daily staffing information on October 28, 2024 at 11:45 AM , 2nd floor unit, did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>Observations of posted daily staffing information on October 29, 2024 at 1:30 PM, 2nd floor unit, did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>Review of posted daily staffing information for October 30, 2024 did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>Review of posted daily staffing information for October 31, 2024 did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>Reviewed 'daily staffing information,' for week of July 1st, 2024 through July 7th, 2024 - did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>Reviewed 'daily staffing information,' for weeks of February 1, 2024 through February 7th, 2024 - did not include total hours required, did not include actual hours worked for each shift, excluded call outs and unit.</p> <p>28 Pa Code 201.14(a) Responsibility of licensee</p>

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<p>F 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that residents are free from significant medication errors.</p> <p>39343</p> <p>Based on observation, staff interview, and clinical record review, it was determined that the facility failed to correctly administer medications in accordance with physician orders, for one of four residents' medication administration observed, resulting in a significant medication error (Resident R151).</p> <p>Findings include:</p> <p>Review of facility policy on Medication Administration and Disposition, revised on June 2023, indicated that Medications must be administered in accordance with the written physician orders.</p> <p>On October 29, 2024, at 9:49 a.m., observed that Employee E3, a Licensed Nurse, administered to Resident R30, the medicine, Keppra Oral Tablet 1000 MG (Levetiracetam), one tablet by mouth in the morning for Seizure.</p> <p>Review of the physician order for R30 revealed that the order was to administer Keppra Oral Tablet 1000 MG (Levetiracetam), two tablets by mouth in the morning for Seizure (A seizure is a temporary period of abnormal electrical activity in the brain that can cause physical changes in behavior. Seizures can cause a variety of symptoms, including loss of consciousness; uncontrollable muscle movements, such as shaking, twitching, or stiffness; unusual sensations or thoughts; changes in thinking or emotions, such as fear, anxiety; short-lived confusion; and a staring spell).</p> <p>At the time of the findings observation, interview with Licensed nurse Employee E3, confirmed the same.</p> <p>Pa Code:211.12(d)(1)(2)(5) Nursing Services.</p>