

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395983	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/12/2025
NAME OF PROVIDER OR SUPPLIER Kearsley Rehabilitation and Nursing Center		STREET ADDRESS, CITY, STATE, ZIP CODE 2100 North 49th Street Philadelphia, PA 19131	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>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.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43923</p> <p>Based on observations and interviews with residents and staff, it was determined that the facility failed to provide a comfortable environment due to clogged bathroom sinks in two of the four nursing units observed (Upper-Level South and North Nursing Units).</p> <p>Findings include:</p> <p>On March 12, 2025, at 10:19 a.m. an interview with the Maintenance Assistant, Employee E8 revealed that facility does have a issue with sinks being clogged. Today he already unclogged bathroom sinks in rooms [ROOM NUMBERS] on the upper-level nursing unit.</p> <p>A review of the maintenance log from December 2024 to March 2025 identified the followings clogged sinks in residents' rooms:</p> <p>December 2, 2024, room [ROOM NUMBER] sink has been clogged</p> <p>December 23, 2024, room [ROOM NUMBER] clogged sink</p> <p>January 9, 2025, room [ROOM NUMBER] clogged sink</p> <p>January 30, 2025, room [ROOM NUMBER] & 61 clogged sink</p> <p>February 11, 2025, room [ROOM NUMBER] clogged sink</p> <p>February 14, 2025, room [ROOM NUMBER] clogged sink</p> <p>On March 12, 2025, at 11:20 a.m., an interview was conducted with Resident R6, who reported an ongoing issue with the sink being clogged in room [ROOM NUMBER]. The Resident R6 mentioned that maintenance had unclogged the sink the previous day, but today, the water still wasn't draining properly.</p> <p>On March 12, 2025, at 11:56 a.m. an observation with the Maintenance Director, Employee E5 confirmed the following clogged sinks:</p> <p>Upper-Level North nursing units: 43-56</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Rooms 44, 48, 54, 56</p> <p>room [ROOM NUMBER]- has a sink full half full of standing water,</p> <p>room [ROOM NUMBER]- had full sink of standing water,</p> <p>Upper-Level South nursing unit:</p> <p>Rooms: 29- still clogged, this room was treated to be unclogged this morning by the maintenance Room: 34 clogged</p> <p>room [ROOM NUMBER]- clogged with half full standing water in the sink</p> <p>On March 12, 2025, at 12:56 p.m., an interview with the Administrator confirmed ongoing sink clogging issues within the facility.</p> <p>28 Pa Code 201.18(b)(1)(3)Management</p> <p>28 Pa Code 205.63(b) Plumbing and piping systems required for existing and new construction</p>

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43923</p> <p>Based on clinical record review, facility policy, resident and staff interview, it was determined that the facility failed to ensure complete and accurate medication administration for one of 2 residents reviewed (Resident R2).</p> <p>Findings include:</p> <p>The Facility Policy titled Administering Medication dated 2021, revealed Medications are administered in a safe and timely manner, and as prescribed. It further under policy interpretation and implementation 4. states Medications are administered in accordance with prescriber orders, including any required time frame .</p> <p>A review of the clinical record for Resident R2 revealed an admitted [DATE], with a diagnosis of Type 2 diabetes mellitus without complications and long-term use of insulin.</p> <p>A review of the physician orders dated July 18, 2024, revealed a NovoLOG FlexPen Subcutaneous Solution Pen-injector 100 Unit/ml (insulin Aspart) Inject 10 unit subcutaneously before meals for dm (diabetes mellitus) at 8:00 a.m., 11:00 a.m., 4:00 p.m.</p> <p>On March 12, 2025, at 10:19 a.m. an interview with Resident R2 revealed that on March 6, 2025, and March 9, 2025, during the afternoon medication pass a license nurse, Employee E4 was not aware of how much insulin Resident R2 was supposed to get. I had to tell her that I get 10 units, and she eventually gave me proper amount.</p> <p>A review of the Medication Administration Report (MAR) showed that March 6, 2025, and March 9, 2025, at 4:00 p.m. revealed that insulin Aspart was not documented as administered.</p> <p>On March 12, 2025, at 1:54 p.m., a telephone interview with Licensed Nurse, Employee E4, revealed that medication was administered to Resident R2 on both March 6 and 9, 2025; however, it was not documented. When asked why the documentation did not reflect this, Employee E4 responded, I don't know.</p> <p>On March 12, 2025, at 2:42 p.m. an interview with the Director of Nursing, Employee E2 confirmed that insulin medication was not appropriately documented for March 6, 9, 2025.</p> <p>28 Pa. Code 211.12(d)(1)(5) Nursing services</p>