

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395989	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/29/2024
NAME OF PROVIDER OR SUPPLIER Providence Rehab and Hlthcare Ctratmercyfitzgerald		STREET ADDRESS, CITY, STATE, ZIP CODE 600 South Wycombe Ave Yeadon, PA 19050	

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 0919</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Make sure that a working call system is available in each resident's bathroom and bathing area.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46508</p> <p>Based on observation, review of facility policy, interview with resident and staff, it was determined that the facility failed to ensure that resident's call bells were within reach for four of 25 residents observed (Resident R1, R2, R3, and R4).</p> <p>Findings include:</p> <p>Review of facility policy on answering call light revealed the following: Under section. Purpose. The purpose of this procedure is to ensure timely responses to the resident's requests and needs. Under section General Guidelines. #4. Be sure the call light is plugged in and functioning at all times.</p> <p>Observation of the First and Second floor unit conducted on May 29, 2024, from 8:15 a.m. to 9:54 a.m. revealed that Resident R4's call bell was hanging over her bedside table and out of reach of the resident.</p> <p>Interview with Unit manager, Employee E3, conducted at the time of the observation confirmed that the call bell was hanging over resident's bedside table.</p> <p>Observation of Resident R1' room (Rm 119-A) revealed that Resident R1's was not in her room. Further observation revealed that a call bell was clipped to Resident R1's bed. Further observation revealed that the call bell clipped to Resident R1's bed was plugged into Resident R2's call bell socket. Further observation revealed that the call bell's call red button was missing and did not work.</p> <p>Further observation revealed that call bell plugged into Resident R1's call bell socket was hanging over Resident R1's bed side table and was not within reach from Resident R1's and Resident R2's bed</p> <p>Interview with Resident R2 conducted at the time of the observation, revealed that she had not been able to use her call bell because its broken and that it has been broken for a week now. Further interview with Resident R1 revealed that her broken call bell was the one that was clipped to her roommates' bed.</p> <p>Interview with first floor unit manager Employee E4 conducted at the time of the observation confirmed that Resident R1 and Resident R2's call bells were switched. Further Employee E4 also confirmed that resident R1's call bell was hanging over her bedside table and was not within reach from both Resident R1's bed and R2's bed.</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 0919</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Further Employee E4 also confirmed that the Resident R2's call bell button was missing the red button and that it was broken and cannot be used. Further Employee E4 also revealed that sometimes the call bell button breaks.</p> <p>Further observation revealed that room [ROOM NUMBER] Resident R3's call bell was hanging over her bed side table and was not within her reach.</p> <p>Interview with Employee E4 conducted at the time of the observation confirmed that Resident R3's call bell was hanging over her bedside table and was not within her reach.</p> <p>28 Pa. Code 211.12(c) Nursing services</p> <p>28 Pa. Code 211.12(d)(12)(3) Nursing services</p>		