

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396082	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/02/2026
NAME OF PROVIDER OR SUPPLIER Park Lane Post Acute LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 1619 East Boot Road East Goshen West Chester, PA 19380	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on a review of clinical and pharmacy records and staff interviews, it was determined that the facility failed to ensure medications were made available for one of the two residents reviewed (Resident CL1). Findings include: Clinical records review revealed Resident CL1 was admitted to the facility on [DATE], with a diagnosis of T11-T12 compression fracture. A review of the Physician's order (POS) dated November 26, 2025, revealed Lyrica (A medication used to treat nerve pain and seizures) 25 mg one capsule by mouth three times daily. The medication was scheduled at 9:00 a.m., 1:00 p.m., and 9:00 p.m. A review of the November 2025 Medication Administration Record (MAR) revealed that Resident CL1 was not administered Lyrica on November 27, 2025, at 9:00 a.m., 1:00 p.m., and 9:00 p.m. A review of the nursing progress notes dated November 27, 2025, at 10:39 a.m., revealed Lyrica medication not yet in from pharmacy. A review of the nursing progress notes dated November 27, 2025, at 12:12 p.m., revealed Lyrica medication Not here from pharmacy, not available in Pixis. (An automated medication dispensing system). A review of the nursing progress notes dated November 27, 2025, at 11:07 p.m., revealed Lyrica medication waiting for pharmacy to deliver. A review of the pharmacy records, delivery report revealed Lyrica medication was not delivered to the facility until November 28, 2025, which resulted in Resident CL1 missing three doses of the medication. Clinical records review failed to reveal that the physician was notified of the missed medications. A review of the POS dated November 25, 2025, revealed an order for Hydrocodone-Acetaminophen (A medication used to treat moderate to severe pain) 7.5-325mg, give one tablet every four hours for back pain. A review of December 2025, MAR revealed Hydrocodone-Acetaminophen was not administered to Resident CL1 on December 8, 2025, at 8:00 a.m. A review of the nursing progress notes dated December 8, 2025, 10:17 a.m., revealed medication administered approximately 11:15 a.m., delayed due to unavailability. An interview with the Director of Nursing on January 2, 2026, at 1:00 p.m., confirmed that the above medications were not administered to Resident CL1 due to unavailability from the pharmacy. The facility failed to ensure Resident CL1's pain medications were made available for the resident for administration. 28 Pa. Code 211.5(f) Clinical records 28 Pa. Code 211.12(d)(1)(3)(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
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