

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396083	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 02/08/2024
NAME OF PROVIDER OR SUPPLIER Sterling Health Care and Rehab Center		STREET ADDRESS, CITY, STATE, ZIP CODE 318 South Orange Street Media, PA 19063	

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 - Some</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** 22502</p> <p>Based on clinical record review and staff interview it was determined that the facility failed to ensure that the pharmacy provided medications timely for two of three residents reviewed (Resident R1 and R2).</p> <p>Findings include:</p> <p>Review of Resident R1's clinical record revealed Resident R1 was admitted [DATE], with diagnoses of but not limited to Hematuria (blood in the urine), acute angle-closure Glaucoma (condition that causes pressure to go up quickly in the eye and block the drainage system), CVA (cerebral vascular accident - stroke), hypertension (high blood pressure), and Depression.</p> <p>Review of Resident R1's physician's admission orders included an order for Dorzolamide HCl Ophthalmic Solution 2%, instill 1 drop in both eyes two times a day related to acute angle-closure glaucoma, bilateral.</p> <p>Review of the February 2024 Medication Administration Record (MAR) revealed that Dorzolamide was not administered January 18-23, 2024 for a total of ten times.</p> <p>Review of progress notes of January 19, January 20, and January 21, 2024, revealed awaiting delivery and delivery is pending for eye drops. Review of progress note of January 22, 2024, revealed pharmacy was called and assured eye drop would be delivered late tonight. Review of progress note of January 23, 2024, revealed med [eye drops] not available at this time. Pharmacy said they will be here tonites run. Review of progress note of January 23, 2024, revealed staff spoke with pharmacy at 3:30 p.m. regarding the eye drops and pharmacy indicated they may need authorization from the Director of Nursing (DON) for new bottle to be delivered. Review of progress note of January 23, 2024, revealed family brought in eye drops which were administered.</p> <p>Review of Resident R2's clinical record revealed that Resident R2 was admitted [DATE], with diagnoses of but not limited to hypothyroidism (underactive thyroid), multiple sclerosis (disease affect the central nervous system), hypertension, type II diabetes(disease that occurs when blood sugar is too high) and respiratory failure (syndrome in which the respiratory system fails).</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Review of physician admission orders included orders for, but not limited to, Fluticasone-Salmeterol Inhalation Aerosol Powder Breath Activated 250-50 MCG/ACT 1 puff inhale orally two times a day related to respiratory failure, Ascorbic Acid Oral Tablet 500 MG (milligrams) Give 1 tablet by mouth two times a day for vitamin deficiency, Amlodipe Besylate Oral Tablet 2.5 MG Give 1 tablet by mouth one time a day related to essential (primary) hypertension, Aspirin Low Dose Oral Tablet Chewable 81 MG Give 1 tablet by mouth one time a day for prophylaxis, : Brexpiprazole Oral Tablet 2 MG Give 1 tablet by mouth one time a day related to depression, : Bzotropine Mesylate Oral Tablet 2 MG Give 1 tablet by mouth three times a day for tremors, Diclofenac Potassium Oral Capsule 25 MG Give 1 capsule by mouth two times a day related to low back pain, DULoxetine HCl Oral Capsule Delayed Release Particles 30 mg Give 1 capsule by mouth one time a day related to depression administer together with Duloxetine 60 mg for total of 90 mg, Famotidine Oral Tablet 20 mg Give 1 tablet by mouth one time a day for GERD (gastroesophageal reflux disease - digestive disorder), levetiracetam Oral Tablet 750 MG Give 1 tablet by mouth two times a day related to metabolic encephalopathy (condition in which brain function is disturbed due to different diseases or toxins in the body), Gabapentin Oral Tablet 800 MG Give 1 tablet by mouth four times a day related to low back pain, Omega-3 Fish Oil Oral Capsule 1000 MG, Omeprazole Oral Capsule Delayed Release 40 MG Give 1 capsule by mouth one time a day for heartburn, Myrbetriq Oral Tablet Extended Release 24 Hour 25 MG Give 1 tablet by mouth one time a day related to chronic obstructive pyelonephritis (inflammation of the kidney, Vitamin E Oral Capsule 180 MG, Torsemide Oral Tablet 20 MG Give 1 tablet by mouth one time a day related to chronic obstructive pyelonephritis, Vitamin D3 Oral Capsule 1.25 MG (50000 UT) Give 2 capsule by mouth one time a day for vitamin D deficiency, Lidocaine HCl External Cream 3 % Apply to affected area topically every day and evening shift for pain, and Insulin Glargine-yfgn 100 UNIT/ML Solution pen-injector Inject 25 unit subcutaneously at bedtime related to type 2 diabetes mellitus.</p> <p>Review of Resident's R2's January 2024 MAR revealed that the above medications were not administered as ordered.</p> <p>Review of progress note of January 23, 2024, revealed medications were not administered and were waiting on delivery from pharmacy.</p> <p>Interview with the Director of Nursing (DON) on February 8, 2024, at 1:20 p.m. confirmed that Resident R1 did not receive the eye drops that were ordered on admission. The facility was unable to determine if they were delivered from the pharmacy and the pharmacy required reauthorization to supply the eye drops. The DON also confirmed that the family brought in eye drops. The DON indicated the Resident R2 was a late admission at approximately 11:30 p.m. and did not meet the pharmacy's cut-off time for delivery of medications.</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing services</p> <p>Previously cited 10/27/23</p> <p>28 Pa. Code: 211.9 (a)(1) Pharmacy services.</p>		