

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396101	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/11/2024
NAME OF PROVIDER OR SUPPLIER Rehab at Shannondell		STREET ADDRESS, CITY, STATE, ZIP CODE 5000 Shannondell Drive Audubon, PA 19403	

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>46508</p> <p>Based on observation, review of clinical records and staff interview, it was determined that the facility failed to implement a system of records of receipt and disposition of all controlled drugs between shifts to enable an accurate reconciliation and accountability for two of three medication carts observed. (Medication Cart 3rd Floor B Front and</p> <p>Medication cart 3rd Floor B Back)</p> <p>Findings:</p> <p>Review of facility narcotic book for Medication Cart 3rd Floor B Front conducted on July 10, 2024, at 8:52 p. m., during medication administration observation with licensed nurse, Employee E5 revealed an entry for July 10, 2024, with time written 1900 (7:00 p.m.). Further, the column for Nurse going off duty for July 10, 2024, with time written for 1900 had a signature.</p> <p>Interview with licensed nurse Employee E5 conducted at the time of the observation, revealed that licensed nurses work a 12-hour shift and that between shifts, the outgoing and incoming nurses count the narcotics together and that the once they are done counting the controlled substances in the cart, the outgoing nurse signs the outgoing column of the narcotic book for that date and the incoming nurse also signs the incoming column of the narcotic book for that date.</p> <p>Further interview with Employee E5 revealed that licensed nurse Employee E5 was the one who counted the narcotics at the beginning of the day shift on July 10, 2024.</p> <p>Interviewed with Employee E6 conducted at the time of the observation, confirmed that at the beginning of the day shift for July 10, 2024, he pre signed the column for Nurse going off duty for July 10, 2024, for which the time 19:00 was written. Further Employee E6 also revealed that he pre signed it because he was going to be the one to sign it at the end of his shift anyway.</p> <p>Further review of the narcotic book for Medication Cart 3rd Floor B Front revealed that on:</p> <p>June 6, 2024 at 7:00 (1.m.), the column Nurse going off duty did not have a signature.</p> <p>June 22, 2024, at 11:00 p.m., the column Nurse coming on duty did not have a signature.</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 - Few</p>	<p>June 23, 2024, at 7:00 a.m., the column Nurse going off duty did not have a signature.</p> <p>June 25, 2024, at 7:00 a.m., the column Nurse going off duty did not have a signature.</p> <p>June 30, 2024, at 5:45 a.m., the column Nurse coming on duty did not have a signature.</p> <p>Further review of the facility narcotic book for Medication Cart 3rd Floor B Back revealed that on:</p> <p>June 6, 2024, at 7:15 a.m., the column Nurse going off duty did not have a signature.</p> <p>June 19, 2024, at 7:00 a.m., the column Nurse going off duty did not have a signature.</p> <p>June 22, 2024, at 5:00 a.m., the column Nurse coming on duty did not have a signature.</p> <p>June 22, 2024, at 7:00 a.m., the column Nurse going off duty did not have a signature.</p> <p>June 29, 2024, at 7:00 p.m., the column Nurse coming on duty did not have a signature.</p> <p>July 4, 2024, at 7:00 p.m., the column Nurse coming on duty did not have a signature.</p> <p>July 10, 2024, at 7:00 a.m., the column Nurse coming on duty did not have a signature.</p> <p>Review of the facility narcotic book for Medication cart 3rd Floor B Back conducted during medication administration on the 3rd floor unit on July 10, 2024, at 9:12 a.m. with Employee E6 and Employee E8 revealed that the on July 10, 2024, at 7:00 a.m. the incoming column did not have a signature.</p> <p>Interview with licensed nurse Employee E8 conducted by Employee E6 at the time of the observation in the presence of the surveyor, confirmed that Employee E8 did not sign the column for Nurse coming on duty at the beginning of her shift for July 10, 2024</p> <p>28 Pa. Code 201.18(b)(2) Management</p> <p>29 Pa. Code 211.9(a)(1)(k) Pharmacy services</p> <p>28 Pa. Code 211.12(d)(1)(3)(5) Nursing services</p>		

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<p>F 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure medication error rates are not 5 percent or greater.</p> <p>36609</p> <p>Based on observation, interviews with staff, review of clinical records and facility policy, it was determined that the facility failed to have a medication error rate less than five percent (Residents R9 and R244).</p> <p>Findings include:</p> <p>Review of the facility's medication policy dated 2/2017 states, All medications are administered safely and appropriately to all residents and to follow 6 Rights of Medication Administration during medication pass (right resident, right medication, right dose, right route, right time, right documentation).</p> <p>The facility's medication error rate was 8 % based on 25 medication opportunities with two medication errors.</p> <p>Review of Resident R9's physician orders instructed to take Cyanocobalamin (Vitamin B-12) 1,000 mcg sublingual route (placed under your tongue to dissolve) once daily.</p> <p>Observation of a medication administration pass on July 11, 2024, at 9:08 a.m. with Registered Nurse, Employee E3 revealed the nurse administered Cyanocobalamin by mouth to Resident R9.</p> <p>Review of Resident R244's physician orders instructed to take Cyanocobalamin 1,000 mcg sublingual route once daily.</p> <p>Observation of a medication administration pass on July 11, 2024, at 9:38 a.m. with Licensed Practical Nurse,</p> <p>Employee E4 revealed the nurse administered the Cyanocobalamin by mouth to Resident R244.</p> <p>Interview with the Director of Nursing on July 11, 2024, at 12:30 p.m. confirmed the nurses did not follow the physician's order for Cyanocobalamin and did not administer the medication sublingually.</p> <p>28 Pa. Code 211.12(d)(1)(5) Nursing services</p>

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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 46508</p> <p>Based on review of clinical records, review of facility policy, observation, and staff interview, it was determined that the facility failed to ensure that all drugs and biologicals are stored and labeled in accordance with professional standards for one of three medication carts observed (Med cart 3rd B back) and one of two medication rooms observed (Third-floor medication room).</p> <p>Findings include:</p> <p>Review of facility policy for medication administration dated February 2017, revealed that under section Policy: all medications are administered safely and appropriately to all residents. Under section Process: Check medication for expiration date and discard if indicated and check multi dose vials for date when opened and discard if indicated.</p> <p>Observation of med cart 3rd B back conducted during medication administration on the 3rd floor unit on [DATE], at 9:12 a.m. with Licensed nurses, Employee E6 and Employee E8 revealed a Glucagon injection (an emergency medication used to treat severe hypoglycemia (low blood sugar) in diabetes patients) in the top drawer of the medication cart. Further observation revealed that the Glucagon injection had an expiry date of [DATE].</p> <p>Interview with Licensed nurse, Employee E6 conducted at the time of the observation confirmed that an expired Glucagon injection in the top drawer of the medication cart had an expiration date of [DATE].</p> <p>Observation of the third-floor medication room conducted on [DATE], at 10:09 a.m. with Licensed nurse, Employee E7 revealed an open vial of Tuberculin PPD 5TU/0.1ml (used in a skin test to help diagnose tuberculosis) in the refrigerator did not have a date opened affixed to the vial or the box.</p> <p>Interview with Licensed nurse, Employee E7 conducted at the time of the observation confirmed that an open vial of tuberculin PPD 5TU/0.1ml in the refrigerator did not have a date opened affixed to the vial or the box.</p> <p>28 Pa. Code 201.18(b)(l) Management</p> <p>28 Pa. Code 211.12(d) Nursing services</p> <p>28 Pa. Code 211.9(i) Pharmacy services</p>		