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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396143 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 03/30/2026 |
| NAME OF PROVIDER OR SUPPLIER Aristacare at East Falls | | STREET ADDRESS, CITY, STATE, ZIP CODE 3300 Henry Avenue, 7th Floor Philadelphia, PA 19129 | |

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) |
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| <p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>Provide and implement an infection prevention and control program.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, review of facility documents, and staff interviews, it was determined that the facility failed to ensure that one out of eleven resident room maintained functional running water necessary for hygiene and provision of care. (room [ROOM NUMBER]) Findings include: Review of the Centers for Disease Control and Prevention (CDC), Guideline for Hand Hygiene in Health-Care Settings, MMWR Recommendations and Reports, Vol. 51, No. RR-16, October 25, 2002. revealed hand hygiene, including washing hands with soap and water, is essential for infection prevention during high-risk patient care activities such as wound care, toileting, tracheostomy care, and feeding tube management. Per CDC guidance, alcohol-based sanitizer alone is not sufficient when hands are visibly soiled or after exposure to bodily fluids, and proper handwashing is required to reduce the risk of infection transmission. Observations conducted at approximately 9:40 a.m. with the Director of Maintenance, Employee E6, in resident's room [ROOM NUMBER], it was noted that the sink was not functioning and there was no running water available. The shower was non-functional, with the faucet removed, and although the toilet was operational, the absence of running water in the sink and shower was confirmed. The Director of Maintenance, Employee E6 stated that the water supply to the room had been shut off for approximately two weeks due to a plumbing issue and confirmed that both the sink and shower were inoperable. He further stated that this was the only room on the unit affected by this issue. Review of facility document review revealed that an outside contracting company evaluated the issue and provided an estimate for repairs to room [ROOM NUMBER] dated February 9, 2026. However, the facility did not accept or proceed with the proposed work, and repairs had not been completed as of the date of the survey. Interview conducted at approximately 2:00 p.m. on March 30, 2026, with the Nursing Home Administrator, employee E1 confirmed awareness of a water issue in room [ROOM NUMBER] for approximately two weeks but stated he was unaware that the sink lacked running water. When questioned regarding the repair estimate dated February 8, 2026, approximately seven weeks ago, the Administrator indicated that the facility declined the external estimate and planned to complete the repairs internally; however, no definitive start date or timeline for completion was provided. Employee E1 further stated that hand sanitizer was available in the room as an interim infection control measure and did not identify the lack of running water as an infection control concern. He confirmed that no alternative accommodations had been implemented, despite the facility having available beds (66-bed capacity with a census of 61) and the ability to relocate the resident if necessary. Interview with Licensed nurse Employee E3 on March 30, 2016, at 1:10 PM, confirmed that the number one priority for infection control in patient care is proper hand hygiene. The Licensed nurse, Employee E3 stated that nursing staff must wash their hands, as it is crucial to patient care. In situations where water is not immediately available, the Employee E3 reported that staff would use hand sanitizer until they are able to wash their hands. Interview with Respiratory Therapist, Employee E4, on March 30, 2026, at 1:45p.m. revealed that infection prevention is very important, especially in a high-acuity environment. The therapist stated that, in her role, proper hand hygiene is critical to her work. Interview with Nursing Assistant, Employee E 5 on March 30, 2026, at 1:55 p.m. revealed that staff are educated to wash their hands all the time, especially before and after providing patient care, (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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> <p>Note: The nursing home is disputing this citation.</p> | <p>in order to prevent infections. 28 Pa. Code 201.14 (a)(g) Responsibility of Licensee 28 Pa. Code 201.18(e) (2.1) Management 28 Pa. Code 204.19 Plumbing, Heating, Ventilation, Air Condition and Electrical</p> | | |