

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 415027	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/27/2025
NAME OF PROVIDER OR SUPPLIER Oak Hill Health & Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 544 Pleasant Street Pawtucket, RI 02860	

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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41542</p> <p>Based on surveyor observation, record review and staff interview, it has been determined that the facility failed to provide a safe, functional, sanitary, and comfortable environment for residents, relative to 3 of 3 units observed for the condition of resident bathrooms and shower rooms.</p> <p>Findings are as follows:</p> <p>Record review of a community reported complaint submitted to the Rhode Island Department of Health on 3/24/2025 alleges that areas of the nursing home appear to be under construction, but appear to be sitting in a state of disrepair . In addition, the complainant revealed his/her loved one's room smells overwhelmingly of urine, and that s/he mentioned this on 3/14/2025 and was told that they would have housekeeping do a deep cleaning. When s/he returned on 3/21/2025, the room still smelled of urine.</p> <p>1. Surveyor observations on 3/26/2025 at approximately 9:00 AM of the 1st floor revealed the following:</p> <ul style="list-style-type: none"> - The 1st floor shower room had black matter inside and around the base in the shower stall to the left. The grout in the corners of the stall had black and pink matter extending halfway up the tile. - The bathroom in resident room [ROOM NUMBER] had an odor of urine. Additionally, the inside of the toilet bowl was discolored with brown stains. <p>2. Surveyor observations on 3/26/2025 at approximately 9:20 AM of the 2nd floor revealed the following:</p> <ul style="list-style-type: none"> - The 2nd floor shower room revealed pink and black matter all along the base of the shower stall. The grout in the corners of the stall had pink and black matter extending halfway up the grout in one of the shower stalls. - The bathroom identified in the above mentioned community reported complaint had an odor of urine. Additionally, the inside of the toilet bowel was discolored with brown stains. <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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<ul style="list-style-type: none"> - The bathroom in resident room [ROOM NUMBER] had an odor of urine. Additionally, the inside of the toilet bowl was discolored with brown stains. - The bathroom in resident room [ROOM NUMBER] had a fairly large hole at the bottom of the wall across from the toilet. It measured approximately 12-15 inches. <p>3. Surveyor observations on 3/26/2025 at approximately 9:40 AM of the 3rd floor revealed the following:</p> <ul style="list-style-type: none"> - The 3rd floor shower room had black matter all along the base of the middle shower stall. The grout had black and pink matter extending halfway up the tile. Additionally, when the curtain to the stall was opened, multiple small flies were observed to fly out. - Resident room [ROOM NUMBER] had a strong odor of urine and the bed closest to the window had 2 urinals, half full, hanging off the foot of the bed. - The bathroom in resident room [ROOM NUMBER] had a strong odor of urine. Additionally, the inside of the toilet bowl was discolored with brown stains. - The inside of the toilet bowl in resident room [ROOM NUMBER] was stained with a brown substance. - On the [NAME] unit, a wall was observed to be partially plastered with three visible holes. - Multiple wheelchairs, recliners, a bed frame, and small table were stored in the [NAME] unit common area. <p>During surveyor observations and simultaneous interview with the Administrator, Director of Nursing, and Maintenance Director on 3/26/2025 at approximately 10:00 AM, they acknowledged the above mentioned observations and indicated that they would remedy the issues by replacing toilet bowls, cleaning, and fixing the areas that are in disrepair.</p>		