

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395472	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 02/01/2025
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NAME OF PROVIDER OR SUPPLIER: LEBANON SKILLED NURSING AND REHABILITATION CENTER STATE LICENSE NUMBER: 905002	STREET ADDRESS, CITY, STATE, ZIP CODE: 900 TUCK STREET LEBANON, PA 17042
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P 5520		P 5520		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE:	(X6) DATE:

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P 5520	Continued from page 1 Nursing services. (3) Effective July 1, 2024, a minimum of 1 nurse aide per 10 residents during the day, 1 nurse aide per 11 residents during the evening, and 1 nurse aide per 15 residents overnight. This REGULATION is not met as evidenced by:	P 5520	Preparation and submission of this plan of correction is required by state and federal law. This plan of correction does not constitute an admission for purposes of general liability, professional malpractice or any other court proceeding. P5520 Nurse Aide Ratio 1. All residents received care in accordance with their plan of care and attending physician orders. 2. The Clinical Leadership Team and scheduler review the schedule daily. In the event of call offs the center follows staffing procedures including exhausting all possible replacements from internal staffing pool and contracted agency staff. Center continues to offer incentives, coordinate staffing schedules, and replace call offs per protocol while actively continuing to hire for all open positions and additional pool staff.	Completion Date: 02/18/2025 Status: APPROVED Date: 02/05/2025

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P 5520	Continued from page 2	P 5520	<p>3. All registered nurses and the scheduler have been educated on the 7/01/2024 nurse aide ratio and the importance of maintaining the schedule as posted.</p> <p>4. To monitor and maintain ongoing compliance the DON/designee will audit staffing weekly x4 weeks then monthly for 2 months. Results will be reviewed by the QAPI Committee for recommendations as needed.</p>	

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P 5520	Continued from page 3 Based on a review of nursing time schedules, it was determined that the facility failed to meet the minimum nurse aide (NA) to resident ratios for 20 of 21 days reviewed. Findings include: Review of nursing schedules for 21 days from January 11 through January 31, 2025, revealed the following: The facility failed to meet the minimum NA to resident ratio of one NA for ten residents on day shift (7:00 a.m. to 3:00 p.m.) on January 11, 13, 14, 15, 16, 17, 19, 20, 21, 22, 23, 24, 26, 27, 28, 29, 30, and 31, 2025. The facility failed to meet the minimum NA to resident ratio of one NA for 11 residents on evening shift (3:00 p.m. to 11:00 p.m.) on January 13, 17, 19, 20, 21, 22, 24, 25, 26, 27, 28, 29, 30, and 31, 2025.	P 5520		

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P 5520	Continued from page 4 The facility failed to meet the minimum NA to resident ratio of one NA for 15 residents on night shift (11:00 p.m. to 7:00 a.m.) on January 11, 15, 16, 17, 18, 19, 20, 23, 24, 25, 26, 27, 29, 30, and 31, 2025. In an interview conducted on February 2, 2025, at 2:00 p.m., the Nursing Home Administrator confirmed that the facility failed to meet the required staffing ratio for nurse aides on the previously mentioned dates and shifts.	P 5520		
P 5640		P 5640		

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P 5640	Continued from page 5 Nursing services. (2) Effective July 1, 2024, the total number of hours of general nursing care provided in each 24-hour period shall, when totaled for the entire facility, be a minimum of 3.2 hours of direct resident care for each resident. This REGULATION is not met as evidenced by:	P 5640	<p>1. All residents received care in accordance with their plan of care and attending physician orders. The Clinical Leadership Team and scheduler review the schedule daily.</p> <p>2. In the event of call offs the center follows staffing procedures including exhausting all possible replacements from internal staffing pool and contracted agency staff. Center continues to offer incentives, coordinate staffing schedules, and replace call offs per protocol while actively continuing to hire for all open positions and additional pool staff.</p> <p>3. All registered nurses and the scheduler have been educated on the 7/01/2024 HPPD and the importance of maintaining the schedule as posted.</p> <p>4. To monitor and maintain ongoing compliance the DON/designee will audit staffing weekly x4 weeks then monthly for 2 months. Results will be reviewed by the QAPI Committee for</p>	<p>Completion Date: 02/18/2025 Status: APPROVED Date: 02/05/2025</p>

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P 5640	Continued from page 6	P 5640	recommendations as needed.	

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P 5640	Continued from page 7 Based on a review of nursing time schedules, it was determined that the facility failed to provide a minimum of 3.2 hours of direct care for each resident for 21 of 21 days reviewed. Findings include: Review of nursing schedules for 21 days from January 11 through January 31, 2025, revealed the following total nursing care hours below minimum requirements: Saturday, January 11, 2025: 3.02 care hours per resident. Sunday, January 12, 2025: 3.09 care hours per resident. Monday, January 13, 2025: 2.99 care hours per resident. Tuesday, January 14, 2025: 3.09 care hours per resident. Wednesday, January 15, 2025: 3.06 care hours per resident. Thursday, January 16, 2025: 2.93 care hours per	P 5640		

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P 5640	Continued from page 8 resident. Friday, January 17, 2025: 2.73 care hours per resident. Saturday, January 18, 2025: 2.99 care hours per resident. Sunday, January 19, 2025: 2.58 care hours per resident. Monday, January 20, 2025: 2.59 care hours per resident. Tuesday, January 21, 2025: 2.93 care hours per resident. Wednesday, January 22, 2025: 2.89 care hours per resident. Thursday, January 23, 2025: 2.85 care hours per resident. Friday, January 24, 2025: 2.68 care hours per resident. Saturday, January 25, 2025: 3.06 care hours per resident. Sunday, January 26, 2025: 2.68 care hours per resident. Monday, January 27, 2025: 2.72 care hours per resident.	P 5640		

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P 5640	Continued from page 9 Tuesday, January 28, 2025: 2.87 care hours per resident. Wednesday, January 29, 2025: 2.55 care hours per resident. Thursday, January 30, 2025: 2.90 care hours per resident. Friday, January 31, 2025: 2.59 care hours per resident. In an interview on February 1, 2025, at 2:00 p.m., the Nursing Home Administrator confirmed that the facility failed to provide the minimum hours of direct care for each resident for the days listed above.	P 5640		



Certified End Page

LEBANON SKILLED NURSING AND REHABILITATION CENTER

STATE LICENSE NUMBER: 905002

SURVEY EXIT DATE: 02/01/2025

I Certify This Document to be a True and Correct Statement of Deficiencies and Approved Facility Plan of Correction for the Above-Identified Facility Survey


Jeanne Parisi
Deputy Secretary for Quality Assurance


Debra L. Bogen, MD, FAAP
Secretary of Health



**Pennsylvania
Department of Health**

THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY