

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395609	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 12/17/2024
NAME OF PROVIDER OR SUPPLIER: ROUSE- WARREN COUNTY HOME		STREET ADDRESS, CITY, STATE, ZIP CODE: 701 ROUSE AVENUE YOUNGSVILLE, PA 16371		
STATE LICENSE NUMBER: 181702				
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE)	(X5) COMPLETE DATE
F 0000	INITIAL COMMENT	F 0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE:

(X6) DATE:

Any deficiency statement ending with an asterisk (*) denotes a deficiency which may be excused from correction providing it is determined that other safeguards provide sufficient protection to the patients. The findings stated above are disclosable whether or not a plan of correction is provided. The findings are disclosable within 14 days after such information is made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.

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F 0000	Continued from page 1 Based on a Follow-up Survey completed on December 17, 2024, it was determined that Rouse Warren County Home corrected the deficiencies identified during the survey of September 27, 2024, related to the requirements of 42 CFR Part 483, Subpart B, Requirements for Long Term Care Facilities; however a new deficiency was identified related to the 28 PA Code, Commonwealth of Pennsylvania Long Term Care Licensure Regulations.	F 0000		

Pennsylvania Department of Health

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P 5520		P 5520		

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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	It is the policy of the Rouse Home to provide adequate staffing to meet the needs of all residents. Following the new staffing requirements issued July 1, 2024, the Rouse Home has implemented numerous new measures, to assure that we are doing all that we can to meet the new nurse staffing requirements. Staffing is reviewed by the Nursing Home Administrator and Director of Nursing, and or designee daily. If the staffing schedule does not meet the ratio minimums, we put incentives out to all of the nursing staff via On-shift message, personal phone calls and text messages and incentives are offered for staff to pick up these shifts. Additionally, we have made changes to our time and attendance policy in efforts to minimize staff calling off their scheduled shift. In 2024, we held a total of two NA classes which has helped to increase the overall number of CNAs employed at the Rouse Home. We have significantly increased our recruitment efforts as well in 2024. Efforts include; Job	Completion Date: 02/14/2025 Status: APPROVED Date: 12/24/2024

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P 5520	Continued from page 2	P 5520	<p>postings on indeed, Rouse website, Facebook, radio ads in various counties, and welcome walk-in interviews at any time. Our Hr team attends job fairs, and other local events to advertise open positions. We also market at available opportunities at our local high schools as well as colleges and universities in Warren County and the surrounding areas. We market sign on bonuses for new hires, and also offer our current staff recruitment bonuses, for referring anyone to the open nursing positions, and increased our 2nd and 3rd shift differentials as part of our recruitment and retention efforts. Going forward, the projected monthly schedule will be reviewed with the roll out of the schedule to identify any shifts that do not meet ratio. Once we identify these shifts, we will begin to proactively recruit to fill the open shift.</p> <p>Administrator, DON, Nurse Scheduler will audit daily staffing including CNA ratios, along with all steps taken to fill vacancies 5 days a</p>	

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P 5520	Continued from page 3	P 5520	week and ongoing. Results of the audits will be reviewed and recorded in the monthly QAPI meetings.		

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P 5520	Continued from page 4 Based on review of facility nursing staffing documents and staff interview, it was determined that the facility failed to ensure the Nurse Aide (NA) ratios was met for one NA per 10 residents during the day shift for one of 14 days reviewed (12/07/24). Findings include: Review of facility nursing staffing documents the time period from 11/27/24, through 12/10/24, revealed the following NA staffing shortage for the day shift where the NA ratios were not met: 12/07/24 census of 125 residents 11.50 NAs worked and 12.50 were required. During an interview on 12/17/24, at 9:50 a.m. the Nursing Home Administrator confirmed that the facility did not meet the minimum NA ratio for the above day and shift.	P 5520		



Certified End Page

ROUSE- WARREN COUNTY HOME

STATE LICENSE NUMBER: 181702

SURVEY EXIT DATE: 12/17/2024

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