

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395650	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 12/27/2024
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NAME OF PROVIDER OR SUPPLIER: WARREN MANOR STATE LICENSE NUMBER: 233202	STREET ADDRESS, CITY, STATE, ZIP CODE: 682 PLEASANT DRIVE WARREN, PA 16365
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P 0000	INITIAL COMMENT	P 0000		
P 5520	<p>Based on a Follow-Up Survey completed on December 27, 2024, it was determined that Warren Manor, failed to correct all the deficiencies cited during the survey of October 29, 2024, under the requirements of the 28 PA Code, Commonwealth of Pennsylvania Long Term Care Licensure Regulations.</p>	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	All residents received appropriate care and services to meet their needs on the identified days and there was no direct correlation to an individual resident. Residents of Warren Manor will be protected from future staff ratios below the 1:10 nurse aide for days, 1:11 nurse aide for evenings and 1:15 nurse aide for nights by a proactive preview of daily staff assignments and schedules to ensure adequate staff coverage by Director of Nursing/Designee. The Director of Nursing/designee will review the monthly schedule prior to its start date to review for adequate staffing and fill in missing shifts before giving to the staff. The nursing scheduler/designee will review projected staffing levels with the Director of Nursing/designee daily to ensure that any foreseeable staffing levels below nurse aide ratios are adequately covered. Charge Nurses will be educated on appropriate staffing ratios by Director of Nursing/designee by 1/31/25 to immediately contact	Completion Date: 02/10/2025 Status: APPROVED Date: 01/13/2025

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P 5520	Continued from page 2	P 5520	<p>Director of Nursing for any day that ratios unexpectedly drop below the nurse aide ratio minimum for immediate resolution.</p> <p>Warren Manor will continue to aggressively advertise externally for the recruitment of nursing/nurse aide applicants to enhance current staffing levels. Facility will also review potential admissions and reconsider admissions if the facility is unable to meet minimum staffing levels. Warren Manor is an approved provider of the Pennsylvania Nurse Aide Training and Competency Evaluation Program and has ongoing class trainings throughout the year. Administrative RNs are assigned to an on-call schedule and are available to cover shifts when foreseeable staffing levels are below the ratio levels. Facility offers extra incentives to current staff to cover extra shifts. A weekly recruiting meeting is held to address open positions. Open walk-in interview sessions will be held weekly.</p> <p>Nurse aide ratios will be reviewed by</p>	

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P 5520	Continued from page 3	P 5520	Director of Nursing/nursing designee 3x's a week for a month, then weekly x3 weeks then monthly x2 months. Results will be reported at monthly Quality Assurance and Process Improvement committee meeting.	

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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 a minimum of one nurse aide (NA) per 10 residents on the day shift for one of seven days (12/15/24); and failed to ensure a minimum of one NA per 15 residents on the overnight shift for one of seven days reviewed (12/15/24). Findings include: Review of facility nursing staffing documents for the time period from 12/15/24, through 12/21/24, revealed the following NA staffing shortages for the day shift where the NA ratio was not met: 12/15/24 facility census of 102 residents 9.06 NAs worked and 10.20 were required. Review of facility nursing staffing documents for the	P 5520		

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P 5520	Continued from page 5 time period from 12/15/24, through 12/21/24, revealed the following NA staffing shortages for the overnight shift where the NA ratio was not met: 12/15/24 facility census of 102 residents 6.35 NAs worked and 6.80 were required. During an interview on 12/23/24, at 11:30 a.m. the Nursing Home Administrator confirmed that the facility failed to meet the minimum NA ratio requirements on the above shifts and date.	P 5520		
P 5530		P 5530		

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P 5530	Continued from page 6 Nursing services. (4) Effective July 1, 2023, a minimum of 1 LPN per 25 residents during the day, 1 LPN per 30 residents during the evening, and 1 LPN per 40 residents overnight. This REGULATION is not met as evidenced by:	P 5530	All residents received appropriate care and services to meet their needs on the identified days and there was no direct correlation to an individual resident. Residents of Warren Manor will be protected from future staff ratios below the 1:25 daylight Licensed Practical Nurse, 1:30 evening Licensed Practical Nurse and 1:40 night Licensed Practical Nurse by a proactive preview of daily staff assignments and schedules to ensure adequate staff coverage by Director of Nursing/Designee. The Director of Nursing/designee will review the monthly schedule prior to its start date to review for adequate staffing and fill in missing shifts before giving to the staff. The nursing scheduler/designee will review projected staffing levels with the Director of Nursing/designee daily to ensure that any foreseeable staffing levels below Licensed Practical Nurse ratios are adequately covered. Charge Nurses will be educated by Director of Nursing/designee by 1/31/25 on	Completion Date: 02/10/2025 Status: APPROVED Date: 01/13/2025

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P 5530	Continued from page 7	P 5530	<p>appropriate staffing ratios and to immediately contact Director of Nursing for any day that ratios unexpectedly drop below the nurse ratio minimum for immediate resolution.</p> <p>Warren Manor will continue to aggressively advertise externally for the recruitment of nursing applicants to enhance current staffing levels. Facility will also review potential admissions and reconsider admissions if the facility is unable to meet minimum staffing levels. Administrative registered nurses are assigned to an on-call schedule and are available to cover shifts when foreseeable staffing levels are below the ratio levels. Facility offers extra incentives to current staff to cover extra shifts. A weekly recruiting meeting is held to address open positions. Open walk-in interview sessions will be held weekly. Licensed Practical Nurse ratios will be reviewed by Director of Nursing/nursing designee 3x's a week for a month, then weekly x3 weeks then monthly x2 months.</p>	

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P 5530	Continued from page 8	P 5530	Results will be reported at monthly Quality Assurance and Process Improvement committee meeting.	

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P 5530	Continued from page 9 Based on review of facility nursing staffing documents and staff interview, it was determined that the facility failed to ensure a minimum of one Licensed Practical Nurse (LPN) per 30 residents on the evening shift for two of seven days reviewed (12/19/24 and 12/20/24); and failed to ensure a minimum of one LPN per 40 residents on the overnight shift for three of seven days reviewed (12/19/24, 12/20/24, and 12/21/24). Findings include: Review of facility nursing staffing documents for the time period from 12/15/24, through 12/21/24, revealed the following LPN staffing shortages for the evening shift where the LPN ratio was not met: 12/19/24 facility census of 103 residents 3.28 LPNs worked and 3.43 were required. 12/20/24 facility census of 106 residents 3.21 LPNs worked and 3.50 were required.	P 5530		

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P 5530	Continued from page 10 Review of facility nursing staffing documents for the time period from 12/15/24, through 12/21/24, revealed the following LPN staffing shortages for the overnight shift where the LPN ratio was not met: 12/19/24 facility census of 103 residents 3.28 LPNs worked and 3.43 were required. 12/20/24 facility census of 105 residents 3.21 LPNs worked and 3.50 were required. 12/21/24 facility census of 104 residents 2.08 LPNs worked and 2.60 were required. During an interview on 12/23/24, at 11:30 a.m. the Nursing Home Administrator confirmed that the facility failed to meet the minimum LPN ratio requirements on the above shifts and dates.	P 5530		



Certified End Page

WARREN MANOR

STATE LICENSE NUMBER: 233202

SURVEY EXIT DATE: 12/27/2024

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