



STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>395831</b>	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED:  <b>04/04/2025</b>	
NAME OF PROVIDER OR SUPPLIER: <b>SCHUYLKILL CENTER</b>  STATE LICENSE NUMBER: <b>453002</b>		STREET ADDRESS, CITY, STATE, ZIP CODE: <b>1000 SCHUYLKILL MANOR ROAD POTTSVILLE, PA 17901</b>		
(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
P 5520	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	<ol style="list-style-type: none"> <li>1. C.N.A. ratios for the dates noted in the survey cannot be corrected as this is a past event.</li> <li>2. Calculation of shift C.N.A. ratios will be completed and reviewed daily for accuracy by the scheduler.</li> <li>3. The facility has developed internal incentives to retain and attract new staff. The facility continues to attend job fairs and nursing schools to recruit direct care staff, in addition to other ongoing recruiting initiatives. Nurse Aide classes will resume at the facility on 4/28/25. Facility continues with an employee referral program to recruit staff also. Agency staff are being utilized in an effort to reach daily shift ratios. The scheduler will look ahead for a minimum of 1 week at projected staffing patterns to enable more time to achieve appropriate C.N.A. ratios as needed.</li> <li>4. C.N.A. ratios will be audited by scheduler and DON daily for 4 weeks, then 3 days per week x 2 months or until substantial compliance is achieved. Results will be reported to QAPI committee.</li> <li>5. Date of correction is 06/11/2025.</li> </ol>	Completion Date: <b>06/11/2025</b> Status: <b>APPROVED</b> Date: <b>04/21/2025</b>
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE:		(X6) DATE:

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P 5520	Continued from page 1  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 14 of 21 days reviewed.  Findings include:  Review of nursing schedules for 21 days from March 14 through April 3, 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 March 15, 16, 22, 23, 29, and 30, 2025, and April 2, 2025.  The facility failed to meet the minimum NA to resident ratio of one NA for eleven residents on evening shift (3:00 p.m. to 11:00 p.m.) on March 14, 16, 17, 24, 26, 27, 28, 29, and 30, 2025, and April 2 and 3, 2025.  The facility failed to meet the minimum NA to	P 5520		

Pennsylvania Department of Health

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P 5520	Continued from page 2  resident ratio of one NA for 15 residents on night shift (11:00 p.m. to 7:00 a.m.) on March 17 and 28, 2025.	P 5520		
P 5530		P 5530		

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P 5530	Continued from page 3  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	<ol style="list-style-type: none"> <li>LPN ratios for the dates noted in the survey cannot be corrected as this is a past event.</li> <li>Calculation of shift LPN ratios will be completed and reviewed daily for accuracy by the scheduler.</li> <li>The facility has developed internal incentives to retain and attract new staff. Facility has attended LPN schools to recruit new staff, and introduced employee referral program, as well as calling area LPNs to consider joining facility staff. Presentation to local LPN school graduates scheduled for 4/28/25, and they graduate in May. Entered collaboration with local Penn State campus to introduce graduating nurses to our facility onsite. Agency staff are being utilized in an effort to reach daily shift ratios. The scheduler will look ahead for a minimum of 1 week at projected staffing patterns to enable more time to achieve appropriate LPN ratios as needed.</li> <li>LPN ratios will be audited by scheduler and DON daily for 4 weeks, then 3 days per week x 2</li> </ol>	Completion Date: <b>06/11/2025</b> Status: <b>APPROVED</b> Date: <b>04/21/2025</b>

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P 5530	Continued from page 4	P 5530	months or until substantial compliance is achieved. Results will be reported to QAPI committee. 5. Date of correction is 06/11/2025.	

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P 5530	Continued from page 5  Based on a review of nursing time schedules, it was determined that the facility failed to meet the minimum licensed practical nurse (LPN) to resident ratios for four of 21 days reviewed.  Findings include:  Review of nursing schedules for 21 days from March 14 through April 3, 2025, revealed the following:  The facility failed to meet the minimum LPN to resident ratio of one LPN for 25 residents on day shift (7:00 a.m. to 3:00 p.m.) on March 15, 16, 29, and 30, 2025.  The facility failed to meet the minimum LPN to resident ratio of one LPN for 30 residents on evening shift (3:00 p.m. to 11:00 p.m.) on March 16, 29, and 30, 2025.	P 5530		

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P 5640		P 5640		

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P 5640	Continued from page 7  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	<ol style="list-style-type: none"> <li>1. Nursing hours noted in the survey cannot be corrected as this is a past event.</li> <li>2. Calculation of daily PPD will be completed and reviewed daily for accuracy by the scheduler.</li> <li>3. The facility has developed internal incentives to retain and attract new staff. Two nurse aide classes have been already scheduled and are being recruited with first class starting 4/28/25. LPN school recruitment efforts continue with presentation scheduled on 4/24/25 for nurses that graduate in May. Developed collaboration with local Penn State campus to introduce graduating nurses to long term care in our facility. Agency contracts are in place in an effort to reach daily PPD requirements. The scheduler will look ahead for a minimum of 1 week to determine projected PPD to allow more time to achieve PPD hours requirements.</li> <li>4. PPD hours will be audited by scheduler and DON daily for 4 weeks, then 3 days per week x 2</li> </ol>	Completion Date: <b>06/11/2025</b> Status: <b>APPROVED</b> Date: <b>04/21/2025</b>

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P 5640	Continued from page 8	P 5640	months, or until substantial compliance is achieved. Results will be reviewed at QAPI meeting. 5. Date of compliance is 06/11/2025.		

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P 5640	Continued from page 9  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 16 of 21 days reviewed.  Findings include:  Review of nursing schedules for 21 days from March 14 through April 3, 2025, revealed the following total nursing care hours below minimum requirements:  Friday, March 14, 2025: 3.04 care hours per resident. Saturday, March 15, 2025: 2.76 care hours per resident. Sunday, March 16, 2025: 2.76 care hours per resident. Monday, March 17, 2025: 3.02 care hours per resident. Tuesday, March 18, 2025: 3.15 care hours per resident. Saturday, March 22, 2025: 2.90 care hours per	P 5640		

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P 5640	Continued from page 10  resident. Sunday, March 23, 2025: 3.06 care hours per resident. Monday, March 24, 2025: 3.13 care hours per resident. Wednesday, March 26, 2025: 2.96 care hours per resident. Friday, March 28, 2025: 2.83 care hours per resident. Saturday, March 29, 2025: 2.52 care hours per resident. Sunday, March 30, 2025: 2.68 care hours per resident. Monday, March 31, 2025: 3.03 care hours per resident. Tuesday, April 1, 2025: 3.16 care hours per resident. Wednesday, April 2, 2025: 2.93 care hours per resident. Thursday, April 3, 2025: 2.90 care hours per resident.	P 5640		



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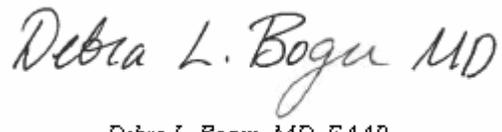
**SCHUYLKILL CENTER**

**STATE LICENSE NUMBER: 453002**

**SURVEY EXIT DATE: 04/04/2025**

**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