



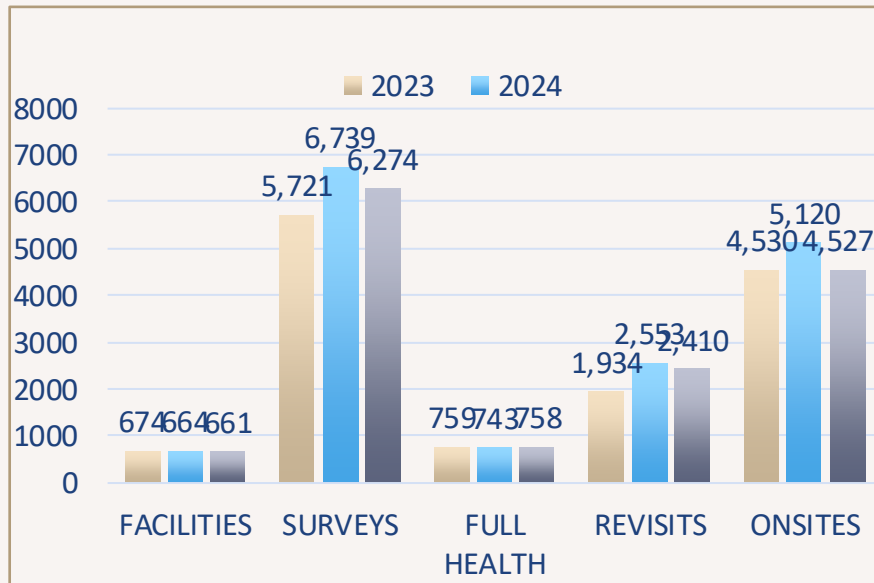
Pennsylvania
Department of Health

Division of Nursing Care Facilities Update

Susan Williamson

Bureau of Long -Term Care Programs

Facility and Survey Data 2023 - 2025



2025

Facilities

- 661 Facilities
- 83,720 Beds

Surveys Completed

- 6,274 Total surveys
- 758 Re-licensure/recertification surveys (Full Health Surveys)
- 2,410 Revisits (to all types of surveys)
- 4,527 On-site visits (includes complaint visits)



Frequency of DNCF Visits 2025-State

Number of Visits

20 +

10 to 19

6 to 9

2 to 5

1

0

% of PA facilities

2.27%

21.18%

30.71%

37.22%

8.62%

0.00%



Frequency of DNCF Visits 2024-State

Number of Visits

20 +

10 to 19

6 to 9

2 to 5

1

0

% of PA facilities

3.77%

26.36%

26.36%

35.84%

7.68

0.00%



Surveys with Scope and Severity D and Above

	<u>2025</u> <u>State</u>		<u>2024</u> <u>State</u>	
Standard Surveys	609		667	
Complaint Surveys	1,181		1,266	
Substandard Quality of Care	67		67	
Immediate Jeopardy Tags	73		84	



Immediate Jeopardy

Appendix Q of the State Operations Manual

Immediate Jeopardy (IJ) represents a situation in which noncompliance by providers, suppliers, or laboratories (hereinafter referred to as “entities”) has placed the health and safety of recipients in its care at **risk for serious injury, serious harm, serious impairment, or death**. These situations must be accurately identified by surveyors, thoroughly investigated, and resolved by the entity as quickly as possible. In addition, noncompliance cited at IJ is the most serious deficiency type and carries the most serious sanctions for entities. An IJ situation is one that is clearly identifiable due to the severity of its harm or likelihood for serious harm and the immediate need for it to be corrected to avoid further or future serious harm

[State Operations Manual](#)



Statewide Deficiency Free Surveys

2025-State: 53 Full Health Surveys were deficiency free

2024-State: 54 Full Health Surveys were deficiency free



State Licensure Sanctions

Civil Penalty

May impose up to \$500 for each deficiency for each day that each deficiency continues.



State Licensure Sanctions

Provisional License

- imposed for up to 6 months
- must have a licensure survey prior to the expiration of the provisional license
- show improvement to return to a regular license
- if no improvement, may move to Provisional II (III, of IV – in order)



Provisional Licenses Issued

2025 – 16

2024 – 24

2023 – 21

2022 – 2

2021 - 12

2020 – 9

2019 – 41

2018 – 3

2017 – 39



State Sanctions

Total state actions
for 2025

PI/CP= 11

PII/CP= 0

PIII/CP= 0

PIV/CP = 1

PI only= 1

PII only= 3

PIII only = 0

PIV only= 0

CP only= 213

Ban = 1

Total = 230

Total state actions
for 2024

PI/CP= 11

PII/CP= 1

PIII/CP= 0

PIV/CP = 0

PI only= 4

PII only= 7

PIII only = 1

PIV only= 0

CP only= 136

Ban = 4

Total = 164

Total state actions
for 2023

PI/CP= 19

PII/CP= 0

PIII/CP= 0

PIV/CP = 0

PI only= 0

PII only= 2

PIII only = 0

PIV only= 0

CP only= 198

Ban = 6

Total = 225

Total state actions
for 2022

PI/CP= 2

PII/CP= 0

PIII/CP= 0

PIV/CP = 0

PI only= 0

PII only= 2

PIII only = 0

PIV only= 0

CP only= 134

Ban = 0

Total = 136

PI=Provisional I license

PII=Provisional II
license

PIII=Provisional III
license

PIV = Provisional IV
license

Ban = Ban on
Admissions

CP=Civil Penalty



Frequently Cited Tags

2025

P5520

P5640

P5530

F684

F689

2024

P5530

P5510

F684

P5520

F689

2023

P5510

P5530

F684

F689

F812

2022

F684

F689

F812

F656

F880

F684 / F309 = QUALITY OF CARE

F880 / F441 = INFECTION PREVENTION & CONTROL

F842 / F514 = RESIDENT RECORDS - IDENTIFIABLE INFORMATION

F689 / F323 = FREE OF ACCIDENT HAZARDS/SUPERVISION/DEVICES

F812 / F371 = FOOD PROCUREMENT, STORE/PREPARE/SERVE – SANITARY

F656 / F279 = DEVELOP/IMPLEMENT COMPREHENSIVE CAREPLAN

F761 / F431 = BIOLOGICALS

F657 = CARE PLAN TIMING AND REVISION

P5510 / P5530 / P5630 / 5520 = NURSING SERVICES



2025 Incidents

Total number of incident reports received: 40,048

Most Frequently reported events

- Transfer to Hospital– 13,055
- Reportable Disease– 9,167
- Other – 6,824



2024 Incidents

Total number of incident reports received: 46,006

Most Frequently reported events

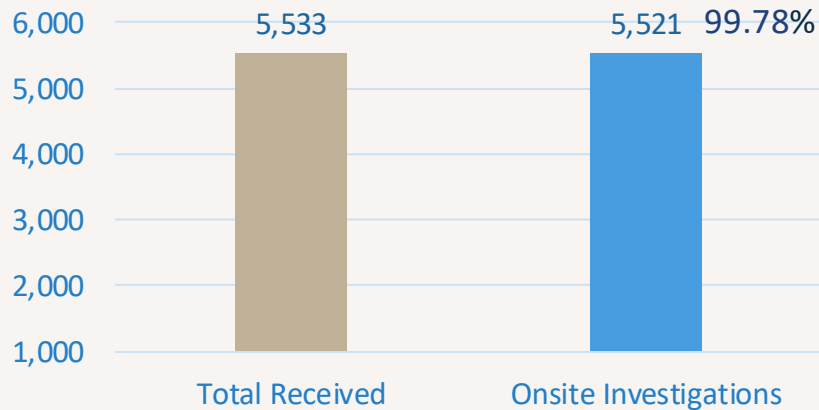
- Reportable Disease– 14,116
- Transfer to Hospital – 13,055
- Other – 6,512



2025- Complaint Data

Complaint Data

2025



Most Frequently Filed

- Care or Services 63.21%
- Environment 14.93%
- Resident Rights 12.78%

Complaint Tags

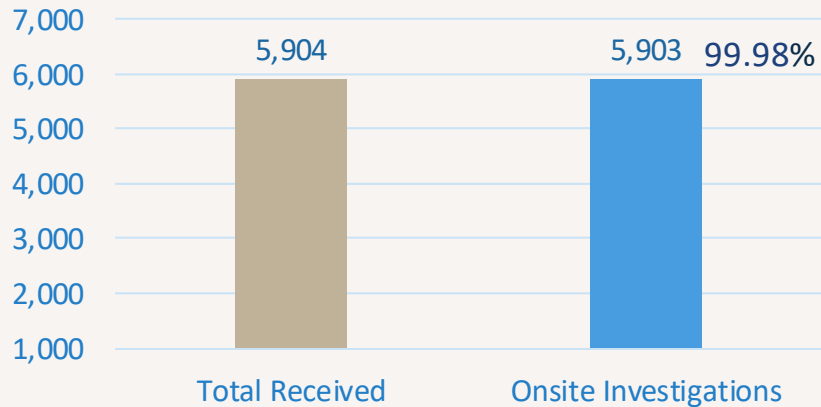
- Total tags cited related to complaint surveys = 6,832
- Highest S/S cited during complaint surveys = L



2024 - Complaint Data

Complaint Data

2024



Most Frequently Filed

- Care or Services 62.66%
- Resident Rights 14.12%
- Environment 13.66%

Complaint Tags

- Total tags cited related to complaint surveys = 7,566
- Highest S/S cited during complaint surveys = L



Critical Element Pathways

CMS Resources website

[Nursing Homes | CMS](#)

Surveyors utilize Critical Element Pathways



Critical Element Pathways

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Infection Prevention, Control & Immunizations

This facility task must be used to investigate compliance at F880, F881, F882, F883, and F887. For the purpose of this task, “staff” includes facility staff (direct and indirect care functions), contracted staff, consultants, volunteers, others who provide care and services to residents on behalf of the facility, and students in the facility’s nurse aide training programs or from affiliated academic institutions. The infection prevention and control program (IPCP) must be facility-wide and include all departments and contracted services. If a specific care area concern is identified, it should be evaluated under the specific care area, such as for pressure ulcers, respiratory care, catheter care, and medication pass observations.



Infection Prevention, Control & Immunizations

Coordination:

- Each surveyor is responsible for assessing the facility for breaks in infection control throughout the survey and is to answer CEs of concern.
- One surveyor performs or coordinates the facility task to review for:
 - Standard and transmission-based precautions
 - Infection Prevention and Control Program (IPCP) standards, policies, and procedures
 - Infection surveillance
 - Water management
 - Laundry services
 - Antibiotic stewardship program (review at least one resident who is receiving an antibiotic if there are concerns)
 - Infection Preventionist
 - Influenza, pneumococcal, and COVID-19 immunizations
- Sample residents/staff as follows:
 - Sample one staff to verify compliance with requirements for educating and offering COVID-19 immunization (select one staff from the actual working schedules for all staff provided during entrance conference).
 - Sample three residents on transmission-based precautions (TBP) for purposes of determining compliance with infection prevention and control national standards, as well as resident care, screening, testing, and reporting.
 - Sample five residents for influenza, pneumococcal, and COVID-19 immunizations review.

General Standard Precautions:

- Staff are performing the following appropriately:
 - Respiratory hygiene/cough etiquette,
 - Environmental cleaning and disinfection, and
 - Reprocessing of reusable resident medical equipment (e.g., cleaning and disinfection of glucometers per device and disinfectant manufacturer's instructions for use).
- Residents, visitors, and others at the facility wear appropriate source control, in accordance with national standards.
- When there is a known communicable disease outbreak, the facility should screen visitors for signs and symptoms of the communicable disease in accordance with national standards and/or state and local health department recommendations. Screening may be conducted by active or passive (e.g., self-screening) means, depending upon national, state or local recommendations.

Hand Hygiene:

- Appropriate hand hygiene practices (i.e., alcohol-based hand rub (ABHR) or soap and water) are followed.



Risk Based Survey (RBS) Pilot

CMS approached Pennsylvania to participate in pilot in February 2026

Training was provided to surveyors/supervisors February

CMS provides list of facilities who qualify to PA

PA performs RBS at some qualified facilities



Risk Based Survey (RBS) Pilot

Developed to evaluate and assess risks

identify areas of concern related to resident safety, care quality

Uses risk-based approach to prioritize surveys

Focus on areas that may present higher risks to residents



Risk Based Survey (RBS) Pilot

How it works

Risk Prioritization

data such as complaints, past violations, quality performance metrics and other risk factors

Targeted Assessments

target specific areas that are deemed higher risk rather than conducting a full review
could include resident care, infection control or billing practices

Focus Areas (may focus on the following)

Resident safety and outcomes

Compliance i.e., resident rights, medication management

Billing and reimbursement practices

Data Driven Decision Making

analysis of data such as survey history, complaints, incident reports, quality measures
allows direct attention and resources to areas of greatest concern



Questions?

