



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **HIGHLAND PARK SENIOR LIVING LLC**
LEGAL ENTITY

To operate **HIGHLAND PARK SENIOR LIVING**
NAME OF FACILITY OR AGENCY

Located at **874 SCHECHTER DRIVE, WILKES-BARRE TOWNSHIP, PA 18702**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **101**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 24

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **March 21,** **2016** until **September 21,** **2016**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **226301**

Robert E. Robinson
ISSUING OFFICER

[Signature]
DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 22 2016

Ms. Kristen Angelicola, Owner
Highland Park Senior Living, LLC
874 Schechter Drive
Wilkes Barre Township, Pennsylvania 18702

RE: Highland Park Senior Living
License #: 226301

Dear Ms. Angelicola:

As a result of the Department of Human Services' licensing inspection on March 4, 2016 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa.Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) or 55 Pa.Code § 2800.11(b) (relating to procedural requirements for licensure or approval of personal care homes a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

Matthew J. Jones
Director

Enclosures
License
License Inspection Summary

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

The home's fire alarms activated on 2/25/16 at 2:10pm. The fire department responded to the home. The home did not submit an incident report to the Department.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Anytime emergency response is called to Highland Park Senior living, as outlined in Regulation 16C, the Department's regional office or the personal care home complaint hotline will be notified within 24 hours in a manner designated by the department. (The fire alarm was accidentally triggered during construction work that was being performed at Highland Park Senior Living. A security staff member accidentally placed a ladder in front of a smoke beam on February 25, 2016, setting off the alarm. The alarm company and county were called immediately to try to stop the dispatch of trucks, but we were unsuccessful in doing so. The incident was faxed and reported to the regional office on the day of inspection, March 4, 2016 as directed by the DHS inspector.) We did not initially report the incident due to regulation 16c stating false alarms do not need to be reported.


The Adm/Designee will also educate all staff in the home regarding what events are reportable incidents, and the process for reporting those events in order that the home is able to submit reportable incidents within the required 24 hour time frame. Q. 3-18-16

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3-18-16</u> (Date)	Plan of correction implementation status as of <u>3-18-16</u> (Date)
The above plan of correction was approved by  (Initials)	<input type="checkbox"/> Fully Implemented
	<input checked="" type="checkbox"/> Partially Implemented - Adequate Progress
	<input type="checkbox"/> Partially Implemented - Inadequate Progress
	<input type="checkbox"/> Not Implemented

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa. Code §2600
 2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home did not complete a supervised fire drill conducted by a fire safety expert.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

A fire safety inspection will be completed annually by a designated fire safety expert. The Executive Director will ensure this is scheduled and completed annually. Highland Park Senior Living's initial annual fire expert conducted the fire drill and was completed on March 6, 2016. Highland Park Senior Living admitted the first resident on December 28, 2015, therefore the fire drill conducted on March 6, 2016 is in compliance with regulation 132b, stating it must be completed annually. Please see attached form.

The fire drill described in 2600.132(b) is a fire drill that is conducted by a fire safety expert and documented as required. This documentation is to be retained on the home. 3-18-16

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kristen Angelicola* Date *3/18/16*

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The above plan of correction is approved as of 3-18-16 (Date)
132b letter provided

The above plan of correction was approved by *[Signature]* (Initials)

Plan of correction implementation status as of 3-18-16 (Date)

Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa. Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

The fire drill conducted on 2/25/16 at 2:10pm and the fire drill conducted on 3/3/16 at 12:50pm does not include seconds.

Administrator A reported that when conducting the fire drills he/she will count his/her self as staff participating on the fire drill logs even though he/she does not participate in the drill. The fire drills conducted from 1/2016-3/2016 are incorrectly documented.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

All fire drills conducted at Highland Park Senior Living will include the date, time, amount of time for evacuation, exit route used and the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, any problems encountered and whether the fire alarm or smoke detector was operable. The person conducting the fire drill will not be included in the drill as a drill participant. The time of evacuation will be recorded in exact minutes and seconds.


The adm. designee will review the fire drill logs on a monthly basis in order to ensure ongoing compliance of 3-18-16

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

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Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION
 Approximately 8 cigarette butts were located in the mulch next to the residents designated smoking area.


3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.
 Maintenance will monitor the entire property surrounding the home on a daily basis to ensure there are no flammable materials around common walkways and exits, paying particular attention to both staff and resident designated smoking areas. Fire extinguishers will be located for immediate use at both designated smoking areas, in case of immediate need.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

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The above plan of correction was approved by  (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa. Code §2600

144(c)(2) Location of a smoking room or outside smoking area a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.

2a. DESCRIPTION OF VIOLATION

Approximately 8 cigarette butts were located in the mulch next to the residents designated smoking area, posing a possible fire hazard.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The designated smoking areas will be moved to safe distance away from the building and mulch to prevent any fire hazards. Maintenance will monitor the areas daily to remove any combustible materials from the area. A fire extinguisher is located at each designated smoking area.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

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The above plan of correction is approved as of 3-18-16
photos attached (Date)

Plan of correction implementation status as of 3-18-16
 (Date)

The above plan of correction was approved by 
 (Initials)

- Fully Implemented
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- Not Implemented

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa. Code §2600

2600.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- (4) A staff person who has completed the medication administration training as specified in § 2600.190 for the administration of oral, topical, eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

On 2/28/16 from 10:30pm-12am and on 2/29/16 from 12am-6am the home did not have anyone that is trained to pass medications. Resident #1 and #2 have orders for PRN medications.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

There will be a medication administration staff person present in the home at all times to provide both scheduled and as needed medications to residents. During the time of the violation, a nurse was on call if the needs for medication administration did arise.


Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kristen Angelicola* Date *3/10/16*

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- Not Implemented

Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa Code §2600
 2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

2a. DESCRIPTION OF VIOLATION
 The directions for operating the home's locking mechanism are not conspicuously posted near the gate that exits the courtyard and the door that leads into the home from the courtyard.


3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.
 Codes to all keypads located in the secured dementia unit will be located directly near keypads to allow immediate exit or entrance for residents, staff and visitors at all times. This includes exterior keypads as well.

Repeat Violation: No	Date(s) of Previous Violation(s):
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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

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Violation Report: 22630 - 03/04/2016 - Novak, Ryan
 PCH Name: HIGHLAND PARK SENIOR LIVING

1. REGULATION 55 Pa. Code §2600
 2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION

The fire drill logs contained white out for the fire drills conducted on 1/18/16 at 10pm and on 2/28/16 at 1:30pm

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

All documentation in the facility will be permanent, legible, dated and signed by the person making the entry. Documentation will be free from white out at all times. All staff will be counseled and trained on the subject.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristen Angelicola* Date *3/16/16*

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 (Date)

Plan of correction implementation status as of 3-18-16
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented