

Department of Human Services
Bureau of Human Service Licensing

September 23, 2020

NATALEY PERRY, ADMINISTRATOR
PACONA CORPORATION
1127 KEMMERTOWN ROAD
STROUDSBURG, PA 18360

RE: GLUCO LODGE
1127 KEMMERTOWN ROAD
STROUDSBURG, PA, 18360
LICENSE/COC#: 24172

Dear Ms. Perry,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/21/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Anne Graziano

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *GLUCO LODGE* License #: *24172* License Expiration Date: *03/21/2021*
 Address: *1127 KEMMERTOWN ROAD, STROUDSBURG, PA 18360*
 County: *MONROE* Region: *NORTHEAST*

Administrator

Name: *Natalie Perry* Phone: *5709927270* Email:
perryjr@ptd.net; lindscott@pa.gov;
agraziano@pa.gov

Legal Entity

Name: *PACONA CORPORATION*
 Address: *1127 KEMMERTOWN ROAD, STROUDSBURG, PA, 18360*
 Phone: *5709927270* Email: *perryjr@ptd.net*

Certificate(s) of Occupancy

Type: *I-1* Date: *03/18/2018* Issued By: *Hamilton Twp.*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *52* Waking Staff: *39*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *07/21/2020*

Inspection Dates and Department Representative

07/21/2020 - On-Site: Gerald Dumas

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *51* Residents Served: *47*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *42*
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *5* Have Physical Disability: *0*

Inspections / Reviews

07/21/2020 - Partial

Lead Inspector: *Gerald Dumas*Follow-Up Type: *POC Submission*Follow-Up Date: *09/11/2020*

9/11/2020 - POC Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Document Submission*Follow-Up Date: *09/21/2020*

9/23/2020 - Document Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Not Required*

132h - Designated Meeting Place

1. Requirements

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

The home was short staffed by one staff person for the overnight 3rd shift hours on 7/16/20, 7/17/20, 7/18/20 and 7/19/20- from 11:00 p.m. and 7:00 a.m. Based on the assistance of five residents needing a one assist, the physical construction of the building –(1 resident residing on the 2nd floor), 13 minutes given by the fire expert to evacuate to fire safe areas , in addition to the home acknowledging that the home had 3 staff in the recent past - the 3rd shift coverage hours are understaffed. The lack of at least 3 staff on the overnight hours presents an evacuation hazard during 3rd shift in the event of an emergency or fire.

Plan of Correction

Directed

While we were meeting our care ratios we do understand the DHS's reasoning for us to have 3 staff members at all times, the ability to safely evacuate is of great importance to us. Historically as you made mention we have had 3 staff members on overnights. In addition, I'd like to add that these past few years we have upgraded our fire safety features in the building. We have added fire safety zones/doors on both floors, as well as a sprinkler system throughout the building and hired a professional fire safety expert.

Unfortunately this pandemic has affecting our staffing. We have exhausted all attempts to correct this issue by adjusting staffing schedule hours, utilizing outside employment agencies (who themselves do not have staff to offer at this time), reaching out to other caregiver agencies (again, who themselves are struggling to staff their own cases), utilizing radio ads, online employment recruitment agencies, local newspapers and magazines as well as raising our salaries to make work more enticing. Even though we are still working on hiring more staff, we have corrected this by utilizing ancillary staff as well as administration to cover overnight hours as needed.

Directed Plan of Correction:

The home will submit the documentation for staff training for the ancillary staff members with the Plan of Correction.

Completion Date: 09/10/2020

Document Submission

Implemented

All staff; Direct Care & Ancillary, whether they are our employees or professional agency hired employees, they all receive an orientation when they start working in our home. Please see attachment orientation check list. Part of this check list is, Fire Safety and Evacuation Protocol.

In addition to this, since we have not done group fire drills due to Covid-19, we have replaced them with smaller group fire safety training with our residents. This is done hallway by hallway by, the activities & maintenance department department together frequently & randomly, so that fire safety and evacuation procedures stay fresh in their minds. I attached a copy of this training as well.