

Department of Human Services
Bureau of Human Service Licensing

March 8, 2021

██████████ CHIEF EXECUTIVE OFFICER
GUARDIAN ELDER CARE AT MOUNTAIN TOP I LLC
8796 ROUTE 219, VSI BUILDING
BROCKWAY, PA 15824

RE: MOUNTAIN TOP SENIOR LIVING
185 SOUTH MOUNTAIN
BOULEVARD
MOUNTAIN TOP, PA, 18707
LICENSE/COC#: 22167

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/08/2020 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: MOUNTAIN TOP SENIOR LIVING **License #:** 22167 **License Expiration Date:** 07/05/2021
Address: 185 SOUTH MOUNTAIN BOULEVARD, MOUNTAIN TOP, PA 18707
County: LUZERNE **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 5704746377 **Email:** [REDACTED]

Legal Entity

Name: GUARDIAN ELDER CARE AT MOUNTAIN TOP I LLC
Address: 8796 ROUTE 219, VSI BUILDING, BROCKWAY, PA, 15824
Phone: 5704746377 **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 24 **Waking Staff:** 18

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 09/08/2020

Inspection Dates and Department Representative

09/08/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 34 **Residents Served:** 24

Secured Dementia Care Unit

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

Hospice

Current Resident: 0

Number of Residents Who:

Receive Supplemental Security Income: 13 **Are 60 Years of Age or Older:** 22
Diagnosed with Mental Illness: 10 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

09/08/2020 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*

Follow-Up Date: *10/26/2020*

11/3/2020 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *11/17/2020*

3/8/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

- 141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
 - 1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
 - 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
 - 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
 - 4. Special health or dietary needs of the resident.
 - 5. Allergies.
 - 6. Immunization history.
 - 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
 - 8. Body positioning and movement stimulation for residents, if appropriate.
 - 9. Health status.
 - 10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident #1's DME dated [REDACTED] did not include anything for health status and cognitive functioning.

Plan of Correction

Directed

The PCP overlooked the Health Status and Cognitive Function Box, they were not checked. When Administrator was cited, [REDACTED] contacted the PCP, [REDACTED] said [REDACTED] would be seeing the resident on 10/20/2020 and would rectify the error at that time. A new Med Eval was completed on that date.

In order for the error not to be repeated the Administrator will monitor each Med Eval, as well as a second observation by an assigned Med Tech. [REDACTED] have attached the newly completed Med Eval.

Directed Plan of Correction:

11-3-2020

In the Return Portion of the POC the Adm will include how the home will prevent this error from occurring again.

AG, 11-3-2020

Completion Date: 11/17/2020

Document Submission

Implemented

Physician completed a new DME.

Update - 03/08/2021