

Department of Human Services
Bureau of Human Service Licensing

April 5, 2021

██████████ ADMINISTRATOR
HERITAGE MILLS PERSONAL CARE CENTER LLC
401 MOLTKE AVENUE
SCRANTON, PA 18505

RE: HERITAGE MILLS PERSONAL CARE
CENTER
846 EAST WICONISCO AVENUE
TOWER CITY, PA, 17980
LICENSE/COC#: 22636

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/18/2021 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: HERITAGE MILLS PERSONAL CARE CENTER **Licen e #:** 22636 **Licen e Expiration Date:** 10/05/2021
Adde : 846 EAST WICONISCO AVENUE, TOWER CITY, PA 17980
County: SCHUYLKILL **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 7175231257 **Email:** [REDACTED]

Legal Entity

Name: HERITAGE MILLS PERSONAL CARE CENTER LLC
Address: 401 MOLTKE AVENUE, SCRANTON, PA, 18505
Phone: 7175231257 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 03/28/2002 **Issued By:** Tower City Borough

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 47 **Waking Staff:** 35

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Rea on: Incident **Exit Conference Date:** 03/18/2021

Inspection Dates and Department Representative

03/18/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60 **Residents Served:** 30

Secured Dementia Care Unit

In Home: Yes **Area:** n.a. **Capacity:** 30 **Residents Served:** 17

Hospice

Current Re ident : 4

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 30
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 17 **Have Physical Disability:** 0

Inspections / Reviews

03/18/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *04/08/2021*

4/1/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *04/12/2021*

4/5/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a - Medical Evaluation

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.

Description of Violation

The initial Medical Evaluation, (D.M.E.) for resident # 1 dated 12/18/20, did not include height and weight.

Plan of Correction

Accept

To prevent further violation of regulation 2600.141.a, when requesting a DME the Director of Wellness will add a note to the requesting fax that all items need to be filled in by the practitioner or the form will be returned. The secured unit checklist was updated 3.31.21 to remind DOW/Administrator of information needed. (see attached) Administrator/designee will oversee compliance.

Please note upon further investigation of this per the nurse at the practitioner's office the residents assessment from the DME dated 12/18/2020 took place in the residents home therefore a height/weight was not obtained by the practitioner.

Completion Date: 03/31/2021

Update - 04/01/2021

seen in attachments 4-1-21

AG

Document Submission

Implemented

See above correction

Update - 04/05/2021

141b2 - Medical Evaluation Changes

1. Requirements

2600.

141.b.2. A resident shall have a medical evaluation: If the medical condition of the resident changes prior to the annual medical evaluation.

Description of Violation

Resident # 1's D.M.E. dated 12/18/20 was not updated to reflect admission to Hospice Services on [REDACTED]

Plan of Correction

Accept

To prevent further violation of regulation 2600 141.5.2, the Director of Wellness will send a blank DME to each practitioner visit, in the event a telemedicine visit is performed DOW will fax the DME over prior to the visit to have completed.

Administrator/designee will oversee compliance.

Completion Date: 03/31/2021

141b2 - Medical Evaluation Changes (continued)

Update - 04/01/2021

Upon Resubmission of the Plan of Correction, the Home will send an updated DME OR a new/current Hospice Order that may be added to the Resident Record to indicate the new Hospice Services and the date added. This will be evidence of compliance. The document must be submitted via the Portal.

AG, 4-1-21

Document Submission

Implemented

See Attached DME and order showing compliance of a resident who started hospice [REDACTED]

Update - 04/05/2021

attachment reviewed.

AG, 4-5-21

225a - Assessment 15 Days

1. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident # 1, did not have an initial completed assessment within 15 days of the resident's admission to the home on [REDACTED]

Plan of Correction

Accept

To prevent further violation of 2600.255.a., the DOW will update [REDACTED] already set in place DME/RASP list to reflect the needs of the initial assessment that needs to be completed within 15 days of admission.

Administrator/designee will oversee compliance

Completion Date: 03/31/2021

Update - 04/01/2021

Upon Resubmission of the Plan of Correction, the Home will submit a new copy of a RASP showing evidence of compliance via the Portal. The example may be a resident admitted since this investigation showing that a new assessment has been completed within 15 days of admission.

If that is not possible, the home will submit a new assessment completed on a new resident since the date the violation occurred on 2-17-21. Again, we are measuring compliance on an assessment completed within 15 days of admission.

AG, 4-1-21

Document Submission

Implemented

See attached RASP of resident admitted [REDACTED] care plan completed 2.24.21

Update - 04/05/2021

attachment reviewed.

AG, 4-5-21