

Department of Human Services
Bureau of Human Service Licensing

August 11, 2021

[REDACTED] ADMINISTRATOR
COUNTRYSIDE CONVALESCENT HOME LIMITED PARTNERSHIP
8221 LAMOR ROAD
ATTN CLAUDIA MCINTYRE
MERCER, PA 16137

RE: QUALITY LIFE SERVICES - MERCER
8221 LAMOR ROAD
MERCER, PA, 16137
LICENSE/COC#: 46050

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/14/2021, 04/15/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Suzy Quinn

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *QUALITY LIFE SERVICES MERCER* **Licen e #:** *46050* **Licen e Expiration Date:** *06/14/2021*
Addr e : *8221 LAMOR ROAD, MERCER, PA 16137*
County: *MERCER* **Region:** *WESTERN*

Administrator

Name: [REDACTED] **Phone:** *7246625860* **Email:** [REDACTED]

Legal Entity

Name: *COUNTRYSIDE CONVALESCENT HOME LIMITED PARTNERSHIP*
Address: *8221 LAMOR ROAD, ATTN CLAUDIA MCINTYRE, MERCER, PA, 16137*
Phone: *7246625860* **Email:** *CJMCINTYRE@QUALITYLIFESERVICES.COM; suzquinn@pa.gov*

Certificate(s) of Occupancy

Type: *C-2 LP* **Date:** *12/04/2003* **Issued By:** *L&I*

Staffing Hours

Re ident Support Staff: *0* **Total Daily Staff:** *16* **Waking Staff:** *12*

Inspection

Type: *Full* **Notice:** *Unannounced* **BHA Docket #:**
Reason: *Renewal* **Exit Conference Date:** *04/14/2021*

Inspection Dates and Department Representative

04/14/2021 - On-Site: [REDACTED]
04/15/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *36* **Residents Served:** *8*

Secured Dementia Care Unit

In Home: *Yes* **Area:** *Memory Lane* **Capacity:** *36* **Residents Served:** *8*

Hospice

Current Re ident : *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older:** *8*
Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability:** *0*
Have Mobility Need: *8* **Have Physical Disability:** *0*

Inspections / Reviews

04/14/2021 - Full

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow-Up Date: *06/11/2021*

6/30/2021 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/07/2021*

8/11/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

183b - Meds and Syringes Locked

1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

On 4/14/21 from 1:50 pm to 2:15 pm, resident #1's [redacted] and [redacted] were unlocked, unattended and accessible on top of the medication cart.

Plan of Correction

Accept

POC: At the time of survey, PCA/Med Tech took out the medications and placed them on the top of the med cart for the Inspector to audit. [redacted] walked away from the med cart due to resident need, leaving the Inspector and the medication unattended.

All PCA/Med Tech's/Nurse will be educated on Regulation 2600.183.b and sign an education record to track this education.

PCHA will audit all completed education and sign off on each education record that staff has completed and signed off on this education.

Completion Date: 06/09/2021

Document Submission

Implemented

See attached

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2 is prescribed [redacted] - [redacted] documents the following [redacted] readings; however, these readings are not on [redacted]

- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]
- [redacted]

185a - Implement Storage Procedures (continued)

Plan of Correction

Accept

POC: All PCA/Med Techs/Nurse will be educated on documenting [redacted] and weekly calibration of [redacted] PCA/Med Techs/Nurse will sign an education record to track this education. PCHA will audit all the completed education records that staff has completed and sign off on this education.

All [redacted] will be calibrated with correct date and time on a weekly basis. This will be completed by the Med Tech or Nurse assigned to that Med Cart on the day this weekly audit is due. This will be recorded on the e-MAR by the Med Tech or Nurse. PCHA/designee will audit weekly for completion of this for four weeks, then monthly for 2 months to ensure compliance.

All [redacted] Monitoring will be completed per MD order. All [redacted] Readings will be documented in the resident's e-MAR and MD order will be followed as to action needed for said reading. If [redacted] Reading is unable to be obtained per MD order, the PCHA/designee or on-call nurse must be notified timely and direction to notify the resident's MD will be given.

All [redacted] Readings will be audited once a week for four weeks then monthly for 2 months to ensure compliance. This audit will be performed by the PCHA/designee.

Completion Date: 06/09/2021

Document Submission

Implemented

see attached

187b - Date/Time of Medication Admin.

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed [redacted] - [redacted]; however, [redacted] does not include the initials of the staff person who administered the medication on [redacted]

Resident #1 is prescribed [redacted] [redacted]; however, [redacted] does not include the initials of the staff person who administered the medication on [redacted]

Plan of Correction

Accept

POC: All PCA/Med Techs/Nurse will be educated on the correct way to document in a resident's e-MAR to be in compliance with this regulation. PCHA will audit all completed education and sign off on each education record that staff has completed and signed off on this education.

PCHA/designee will complete a MAR review audit to ensure that date, time and initials of the staff person administering medications are completed. This audit will be performed weekly for four weeks then monthly for two months to ensure compliance.

Completion Date: 06/09/2021

Document Submission

Implemented

See attached