

Department of Human Services
Bureau of Human Service Licensing

March 15, 2022

[REDACTED], PCHA

RE: PARKSIDE SUITES/PARKSIDE AT
NORTH EAST
2 GIBSON STREET
NORTH EAST, PA, 16428
LICENSE/COC#: 44656

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/28/2021, 06/30/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
[REDACTED]

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: *PARKSIDE SUITES/PARKSIDE AT NORTH EAST* License #: *44656* License Expiration: *11/03/2021*
Address: *2 GIBSON STREET, NORTH EAST, PA 16428*
County: *ERIE* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *10/18/1989* Issued By: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *42* Waking Staff: *32*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *06/30/2021*

Inspection Dates and Department Representative

06/28/2021 - On-Site: [REDACTED]
06/30/2021 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *70* Residents Served: *38*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *37*
Diagnosed with Mental Illness: *12* Diagnosed with Intellectual Disability: *2*
Have Mobility Need: *4* Have Physical Disability: *0*

Inspections / Reviews

06/28/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/14/2021*

Inspections / Reviews (*continued*)

12/09/2021 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *12/16/2021*

01/20/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *01/24/2022*

03/15/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *03/23/2022*

60b - Additional Staffing

1. Requirements

2600.

60.b. The Department may require additional staffing as necessary to protect the health, safety and well-being of the residents. Requirements for additional staffing will be based on the resident's assessment and support plan, the design and construction of the home and the operation and management of the home.

Description of Violation

On multiple dates in June 2021, to include 6/12/21 and 6/13/21, the home served 44 residents, 4 of which had mobility needs and required the assistance of 2 staff persons to evacuate in an emergency. The home consists of 5 floors, including a "memory care unit" where staff provide enhanced supervision to 14 residents. The home's staffing schedule indicates between 11:30p.m. and 7:00a.m. there were only 2 staff members present in the home which was not enough to provide personal care services, supervision and safe evacuation of residents in the event of an emergency as specified on the resident's assessments and support plans.

Plan of Correction

Accept

Corrective Action: Nurse Manager and Administrator will review staffing needs weekly. Nurse Manager and Administrator will review resident support plans and assessments to determine staffing needs. Staffing hours will be evenly distributed between all shifts to provided proper care for the resident and to ensure the needs are meet based on acuity. Parkside North East is currently hiring for additional staff see Attachment A (Ad for open position) Parkside North East also has a sign contract with LECOM Home Care in case of staffing emergency see Attachment B(Contract). Attachment C is letter for LECOM HR showing we hired 3 FT 3rd Shift positions, resident aide and nurse since survey.

Completion Date: 08/13/2021

102i - Soap Dispenser

1. Requirements

2600.

102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.

Description of Violation

There were 2 unlabeled, used bars of soap in a dish on the bathroom sink in the shared bathroom in bedroom #118. There was also an unlabeled used bar of soap in the shower of the shared bathroom in bedroom #118.

Plan of Correction

Accept

Corrective Action: Parkside North East has purchased individual bar of soap containers and have labeled them with resident name and apartment number. Staff are doing weekly audits to stay in compliance and sign off on audit sheet for 6 months. See attached Audit Form (Attachment B) and Proof of photo of soap container (Attachment A).

Completion Date: 08/13/2021

42o - Associate/Communicate

1. Requirements

2600.

42.o. A resident has the right to freely associate, organize and communicate with others privately.

Description of Violation

Residents in the home's North unit are unable to freely access other areas of the personal care home. There are 2 keypad coded and alarmed exit doors in the North unit that lead to other areas of the personal care home. Multiple staff

42o - Associate/Communicate (continued)

interviews indicate residents are not supposed to leave the unit, and if a resident exits without using the keypad, the door alarm activates and staff immediately redirect the resident back inside the North unit. Staff indicate only 9 of the 14 residents residing in the North unit can operate the keypads.

Repeat Violation: 10/18/2019

Plan of Correction

Directed

Corrective Action: Parkside North East will apply for the Secure Dementia Unit. See Attachment A for the application.

If a resident residing on the North Unit of Parkside at North East approaches an exit and wishes to access other areas of Personal Care Home and freely associate or enjoy the fresh air outside, staff are to accompany them to assure their safety.

Directed:

By 3/17/22 and weekly thereafter, the administrator or designee shall review the schedule to ensure adequate staffing is available at all times in the North Unit, to include accompanying residents to leave the North Unit upon request. Documentation shall be kept.

S.Q. 3/15/22

Directed:

By 3/22/22, all staff shall be re-educated regarding the resident's right to freely associate, organize and communicate with others privately, and shall provide supervision as required in accordance with the resident assessment and support plan. Documentation shall be kept.

S.Q. 3/15/22

Directed:

By 3/22/22, the administrator or designee shall privately interview at least 3 residents weekly for 2 months and monthly thereafter to ensure the resident is aware of, and has not been denied the right to freely associate, organize and communicate with others privately, to include leaving the North Unit of Parkside at North East upon request. Documentation shall be kept.

S.Q. 3/15/22

Completion Date: 01/24/2022

99 - Indoor/Outdoor Recreation

1. Requirements

2600.

99. Recreation Space - The home shall provide regular access to outdoor recreation space and recreational items, such as books, newspapers, magazines, puzzles, games, cards and crafts.

Description of Violation

Residents in the home's North unit do not have regular access to outdoor recreation space. There are 2 keypad coded and alarmed exit doors in the North unit that lead to other areas of the personal care home. Multiple staff interviews indicate residents are not supposed to leave the unit, and if a resident exits without using the keypad, the door alarm activates and staff immediately redirect the resident back inside the North unit. Staff indicate only 9 of the 14 residents residing in the North unit can operate the keypads. Resident #1 indicated she would like to go outside but she hasn't been outside in a long time because a staff person has to be with you and staff are very busy.

99 - Indoor/Outdoor Recreation (continued)

Repeat Violation: 10/18/2019

Plan of Correction**Directed**

Corrective Action: Parkside North East will apply for the Secure Dementia Unit. See Attachment A for the application.

See attachment and email suzquinn@pa.gov (<mailto:suzquinn@pa.gov>)

Directed:

By 3/17/22 and weekly thereafter, the administrator or designee shall review the schedule to ensure adequate staffing is available at all times in the North Unit, to include accompanying residents to leave the North Unit upon request. Documentation shall be kept.

S.Q. 3/15/22**Directed:**

By 3/22/22, all staff shall be re-educated regarding the requirement that the home shall provide regular access to outdoor recreation space and recreational items, such as books, newspapers, magazines, puzzles, games, cards and crafts and shall provide supervision as required in accordance with the resident assessment and support plan. Documentation shall be kept.

S.Q. 3/15/22**Directed:**

By 3/22/22, the administrator or designee shall privately interview at least 3 residents weekly for 2 months and monthly thereafter to ensure the resident is aware of, and has not been denied access to outdoor recreation space and recreational items, to include leaving the North Unit of Parkside at North East upon request. Documentation shall be kept.

S.Q. 3/15/22**Completion Date:** 01/24/2022