

Department of Human Services
Bureau of Human Service Licensing

July 21, 2022

[REDACTED], NURSING HOME ADMINISTRATOR

RE: ARBUTUS PARK MANOR
207 OTTAWA STREET
JOHNSTOWN, PA, 15904
LICENSE/COC#: 30006

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/15/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance 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: *ARBUTUS PARK MANOR* License #: *30006* License Expiration: *12/03/2022*
Address: *207 OTTAWA STREET, JOHNSTOWN, PA 15904*
County: *CAMBRIA* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *ARBUTUS PARK MANOR INC*
Address: *207 OTTAWA STREET, JOHNSTOWN, PA, 15904*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *03/23/1979* Issued By: *L&I*
Type: *C-2 LP* Date: *07/17/1974* Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *32* Waking Staff: *24*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *09/15/2021*

Inspection Dates and Department Representative

09/15/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *35* Residents Served: *30*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

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: *2* Have Physical Disability: *1*

Inspections / Reviews

09/15/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/10/2021*

Inspections / Reviews (*continued*)

05/13/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *05/18/2022*

05/19/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *05/26/2022*

07/21/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

The facility failed to report the incident that occurred on [REDACTED] 21. Resident #1 did not take prescribed medications. The medication error was not submitted to the Department as a reportable incident.

Plan of Correction

Accept

1. The medication error described in this violation was reported to the Dept. .
2. MARs for all residents will be audited weekly, beginning 9/20/22, to identify medication errors and ensure a reportable incident was submitted.
3. Reportable incidents and medication errors will be addressed at each quality management meeting beginning on 12/9/22.

Continued from plan of correction :

7. The medication error described in this violation was reported to the Department upon inspection on 09-15-2021. I had negated to send it in when it happened and the inspector caught the error on 09-15-2021.
8. Weekly audits of the Mars on all residents will be completed on Thursdays by the 10pm-6am shift. They will Check the Med packets to the E-Mars and Physician's order sheets.

Completion Date: 05/18/2022

Document Submission

Implemented

All steps have been completed

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

An assessment was not completed for Resident #2, who was admitted to the home on [REDACTED].

Plan of Correction

Accept

1. An initial Assessment was not completed for Resident #2 within 15 days of admission on 7-28-21 due to poor time management.
2. The Assistant Personal Care Director completed the initial assessment on 9-16-21.
3. The Assistant Personal Care Director / Rasp committee will follow a better time line as follows:
 - a. On days 1-3, the resident will get acclimated to their new surroundings and get their room set up. The Assistant Personal Care Director/Rasp committee will utilize the Screener Information sheet and the Resident Care Directives Sheet to start the initial assessment.

225a - Assessment 15 Days (continued)

- b. On days 4-7, the Assistant Personal Care Director/Rasp Committee will check with the LPNs, Med techs, and Aides from each shift and with the Activity Director to see if there are any specific needs that the resident may have.
 - c. On days 8-9, the Assistant Personal Care Director/Rasp Committee will review the assessments and write out a rough draft.
 - d. On the 10th day, the Assistant Personal Care Director will go over the rough draft with the resident and see if adjustments need made.
 - e. On days 11-12, the Assistant Personal Care Director will update the rough draft and go over it with the Rasp Committee.
 - f. On the 13th day, the Assistant Personal Care Director/ Rasp Committee will go over the updated rough draft with the Personal Care Director.
 - g. Days 14-15, the Assistant Personal Care Director will complete the final initial assessment plan.
- The above mentioned will be done with every initial assessment plan. An Initial Assessment Plan check off sheet has been added to the Rasp package to ensure that the Initial Assessment is completed within the 15 days of admission. As of 9-20-21, all staff were educated on the new check off sheet & plan of action.

Completion Date: 12/09/2021

Document Submission

Implemented

all steps have been completed

227a - Support Plan 30 Days

1. Requirements

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

Resident #2 was admitted on [REDACTED] however, the resident's initial support plan was not completed by the home.

Plan of Correction

Accept

1. An Initial Support Plan was not completed for resident #2 within 30 days of admission on [REDACTED] due to poor time management.
2. The Assistant Personal Care Director completed the Initial Support Plan on 9-17-21.
3. The Assistant Personal Care Director will follow a better line as follows.
 - a. The Assistant Personal Care Director will start the Initial Support Plan once the Initial Assessment is completed.
 - b. When doing the Support Plan, the Assistant Personal Care Director/ Rasp Committee will be utilizing the resident's initial assessment plan, DME, Problem list, MARS and TARS, and chart notes to obtain information needed to complete the initial Support Plan within 15 days.
 - c. The Rasp Committee will check the progression of the initial Support Plan every 5 days and update the Assistant Personal Care Director with the progression.
 - d. The Assistant Personal Care Director will work on the Support Plan if progression is slow and will update the Rasp Committee on what was completed.

227a - Support Plan 30 Days (continued)

As of 9-20-21 the Rasp Committee staff were educated on the new plan of action and the new way we are going to work on the Initial Support Plan & check the progression of the Support Plan to ensure that the Support Plan is completed within the 30 days of admission.

Completion Date: 12/09/2021

Document Submission

Implemented

All steps have been completed