

Department of Human Services
Bureau of Human Service Licensing

November 29, 2021

[REDACTED], PRESIDENT
[REDACTED]
[REDACTED]

RE: THE NEIGHBORHOODS AT
WALDEN'S VIEW
7990 US ROUTE 30
NORTH HUNTINGDON, PA, 15642
LICENSE/COC#: 44681

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/12/2021, 10/13/2021 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

November 19, 2021

[REDACTED] PRESIDENT
[REDACTED]
[REDACTED]

RE: THE NEIGHBORHOODS AT
WALDEN'S VIEW
7990 US ROUTE 30
NORTH HUNTINGDON, PA, 15642
LICENSE/COC#: 44681

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 10/12/2021, 10/13/2021 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: *THE NEIGHBORHOODS AT WALDEN'S VIEW* License #: *44681* License Expiration Date: *01/03/2023*
Address: *7990 US ROUTE 30, NORTH HUNTINGDON, PA 15642*
County: *WESTMORELAND* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *7248632600* Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *01/19/2016* Issued By: *Twp. of North Huntingdon*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *74* Waking Staff: *56*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *10/13/2021*

Inspection Dates and Department Representative

10/12/2021 - On-Site: [REDACTED]
10/13/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *40* Residents Served: *37*

Secured Dementia Care Unit

In Home: *Yes* Area: *entire home* Capacity: *40* Residents Served: *37*

Hospice

Current Residents: *7*

Number of Residents Who:

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

Inspections / Reviews

10/12/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *11/22/2021*

11/19/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *11/24/2021*

11/29/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

- 51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff person A, hired [REDACTED], had a criminal background check on [REDACTED]. However, the check indicated "Request Under Review." The home did not have the final report.

Plan of Correction

Accept

Staff person A's background check was ran again while on site. All staff files were audited by campus administrator and resident care coordinator to ensure compliance. Moving forward any new hire paperwork will be reviewed by campus administrator. (please see attached documents)

Completion Date: 10/27/2021

Document Submission

Implemented

see attached documents

92 - Windows

1. Requirements

2600.

- 92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

The screen in the Farm hallway dining room window, to the left of the door, was ripped approximately 6 inches along the right side of the screen.

Plan of Correction

Accept

Maintenance immediately fixed screen while on site. Reviewed and educated 2600.92 regulations with maintenance. Moving forward to stay in compliance a daily walk-through checklist was provided for maintenance and will be signed off by management. (please see attached form)

Completion Date: 11/17/2021

Document Submission

Implemented

see attached documents

184a - Labeling OTC/CAM

1. Requirements

2600.

- 184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

There was no pharmacy label on resident #1's [REDACTED].

184a - Labeling OTC/CAM (continued)

Plan of Correction

Accept

Immediately while on site medication removed from cart and replaced with bottled delivered from family with proper label in place. A cart audit is scheduled with pharmacy for 11/22/2021. Moving forward to stay in compliance a cart audit will be done monthly to ensure all medications have proper label. All medtechs will be educated on what to look for and how to report proper labeling on medications.

Completion Date: 11/26/2021

Document Submission

Implemented

see attached documents

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed [REDACTED], inject 2 units in the morning with breakfast, 2 units daily with lunch and 2 units each evening with supper, hold for blood sugar less than 120.

In addition, the resident is prescribed [REDACTED] with meals per sliding scale: 0-150=0U; 151-200=2U; 201-250=4U; 251-300=6U; 301-350=8U; 351-400=10U; >400=12u CALL MD.

Resident #2 was administered the [REDACTED] per the above-listed order for [REDACTED] on multiple dates in October 2021 including: 10/1 at 7:30 am, 11:30 am and 4:30 pm, and 10/2, 10/3 and 10/4 at 11:30 am and 4:30 pm.

Plan of Correction

Accept

Immediately while on site medication removed from cart and replaced with proper directions from the prescriber. A cart audit is scheduled with pharmacy for 11/22/2021. Moving forward to stay in compliance a cart audit will be done by resident care coordinator monthly to ensure all medications have correct directions from prescriber. All medtechs will be educated on medication directions.

Completion Date: 11/26/2021

Document Submission

Implemented

see attached documents