

Department of Human Services
Bureau of Human Service Licensing

March 14, 2022

[REDACTED]

THE PRESBYTERIAN HOMES IN THE PRESBY OF LAKE ERIE
2628 ELMWOOD AVENUE
ERIE, PA, 16508

RE: ELMWOOD GARDENS OF
PRESBYTERIAN SENIOR CARE
2628 ELMWOOD AVENUE
ERIE, PA, 16508
LICENSE/COC#: 44765

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/05/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Amy Duncan

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: *ELMWOOD GARDENS OF PRESBYTERIAN SENIOR CARE* License #: *44765* License Expiration: *05/25/2022*
 Address: *2628 ELMWOOD AVENUE, ERIE, PA 16508*
 County: *ERIE* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *814-920-1232* Email: [REDACTED]

Legal Entity

Name: *THE PRESBYTERIAN HOMES IN THE PRESBY OF LAKE ERIE*
 Address: *2628 ELMWOOD AVENUE, ERIE, PA, 16508*
 Phone: *8149201220* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *04/03/2067* Issued By: *Dept. L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *17* Waking Staff: *13*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *11/05/2021*

Inspection Dates and Department Representative

11/05/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *35* Residents Served: *16*

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: *16*
 Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

11/05/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/11/2021*

12/02/2021 - POC Submission

Inspections / Reviews (*continued*)

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/09/2021*

12/17/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/30/2022*

03/14/2022 - Document Submission

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

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation was completed on [REDACTED]; however the, previous medical evaluation was completed on [REDACTED]

Plan of Correction

Directed

Regulation 2600.141.b.1 was violated by not being completed by the annual time frame. It is important to make sure a resident has a medical evaluation; at least annually to ensure the patient's overall medical history and current condition is assessed for the purpose of identifying health problems and planning treatment. Medical evaluation was completed immediately upon notification of it not being on time. To prevent any further violations related to regulation 2600.141.b.1 all residents medical evaluations due dates will be tracked monthly in a spread sheet by the Administrator or designee to be initiated 12/3/21 and continued monthly.

(Directed)

By 12/30/21, all staff persons involved with the medical evaluation process will be educated that a medical evaluation shall be completed at least annually. Documentation of education will be submitted to the Department.

(AD 12/17/21)

Completion Date: 12/30/2021

Document Submission

Implemented

Please see attached document for verification of plan of correction.

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 #2 is prescribed Clindamycin 300mg-Take by mouth three times daily; however, the initials of the staff person who administered the medication is not indicated on the resident's September 2021 medication administration record (MAR) on 9/15/21 and 9/16/21 at 2:00 p.m. and on the resident's October 2021 MAR on 10/26/21 at 10:00 p.m. and on 10/29/21 at 2:00 p.m.

Plan of Correction

Directed

Regulation 2600.187.b was violated by not having staff's initials documented on medication administration record (MAR) at the time and date medication was to be administered. It is important to have the MAR initialed by staff at the correct time medication is administered to prevent medication from being given at the incorrect time. To prevent any further violations related to regulation 2600.187.b, nursing staff will be educated verbally by Administrator on how to pull missing meds report throughout the shift as well as at the end of the shift to notify staff of any medications not initialed. Staff will be instructed to print display meds report at the end of each shift, sign it and place in Administrators mailbox for review starting 12/3/21 for 30 days. **(Directed)** Ongoing, the administrator or designee will check all resident MARs at least weekly to ensure the proper documentation of medication administration at the time of administration. **(AD 12/17/21)**

(Directed)

187b - Date/Time of Medication Admin. (continued)

By 12/30/21, all staff persons qualified to administer medications will be educated on the proper procedures for medication administration including documentation of medication administration at the time of administration. Documentation of education shall be submitted to the Department.
(AD 12/17/21)

Completion Date: 01/03/2022

Document Submission

Implemented

Please see attached document for verification of plan of correction.

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.
2. If the condition of the resident significantly changes prior to the annual assessment.
3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident #1's most recent assessment was completed on [REDACTED]; however, the previous assessment was completed on [REDACTED].

Resident #2's most recent assessment was completed on [REDACTED]

Plan of Correction

Directed

Regulation 2600.225.C was violated when the resident's assessment was not completed in the required annual time frame. It is important for a residents assessment to be done annually , if a significant change occurs prior to the annual assessment, or at the request of the Department upon cause to believe that an update is required, enables staff to determine if the resident's care needs continue to match the care we are providing. Assessment was completed immediately upon learning it was past the annual time frame. Administrator has prepared an excel spread sheet on 12/2/21 with all resident's Assessment due dates noted. Administrator or designee will review spread sheet monthly to ensure assessments are completed on time.

(Directed)

By 12/30/21, the administrator or designated staff person will review all resident records to ensure all residents have a current assessment completed.

(AD 12/17/21)

Completion Date: 12/06/2021

Document Submission

Implemented

Please see attached document for verification of plan of correction.

187d - Follow Prescriber's Orders

1. Requirements

2600.

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

187d - Follow Prescriber's Orders (continued)**Description of Violation**

On 9/21/21, resident #2 was prescribed Clindamycin 300mg-Take by mouth three times daily; however, the medication was not administered from 9/24/21 to 10/17/21.

Plan of Correction**Directed**

Regulation 2600.187.d was violated by staff not administering Clindamycin 300 mg PO T.I.D as ordered 9/24/21 to 10/17/21. Violation occurred due to staff not following physicians orders and not calling Drs. office for clarification on orders received. It is important for staff to administer medication as prescribed by prescriber to ensure medication given is effective in treating diagnosis it is prescribed for as well as preventing any further ill effects to resident if medication not received as prescribed. Staff will be educated verbally by Administrator or designee verbally as well as via a read and sign on Administering medication as prescribed by Physician starting 12/3/21 and all staff to be educated by 12/13/21.

(Directed)

Beginning 12/27/21, the administrator or designated staff person qualified to administer medications will monitor all resident MAR's at least weekly to ensure all resident medications are administered as prescribed. Documentation will be submitted to the department.

(AD 12/17/21)

Completion Date: 12/13/2021

Document Submission**Implemented**

Please see attached document for verification of plan of correction.