

Department of Human Services
Bureau of Human Service Licensing

January 26, 2022

SHERYL SHEVCHIK, NHA/EXECUTIVE DIRECTOR
REDSTONE PRESBYTERIAN SENIORCARE
6 GARDEN CENTER DRIVE
GREENSBURG, PA, 15601

RE: REDSTONE HIGHLANDS
4 GARDEN CENTER DRIVE
GREENSBURG, PA, 15601
LICENSE/COC#: 44336

Dear Ms. Sheryl Shevchik,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/01/2021, 12/02/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

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: *REDSTONE HIGHLANDS* License #: *44336* License Expiration: *12/23/2022*
 Address: *4 GARDEN CENTER DRIVE, GREENSBURG, PA 15601*
 County: *WESTMORELAND* Region: *WESTERN*

Administrator

Name: *Danielle Cribbs* Phone: *7248328400* Email:
dcribbs@redstonehighlands.org;
vmangery@redstone.org

Legal Entity

Name: *REDSTONE PRESBYTERIAN SENIORCARE*
 Address: *6 GARDEN CENTER DRIVE, GREENSBURG, PA, 15601*
 Phone: *7248328400* Email: *sshevchik@redstone.org*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *12/05/1995* Issued By: *Labor and Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *73* Waking Staff: *55*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *12/02/2021*

Inspection Dates and Department Representative

12/01/2021 - On-Site: Laurie Garrigan

12/02/2021 - On-Site: Laurie Garrigan

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *61* Residents Served: *49*

Secured Dementia Care Unit

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

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *49*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *24* Have Physical Disability: *1*

Inspections / Reviews

12/01/2021 - Full

Lead Inspector: *Laurie Garrigan*Follow-Up Type: *POC Submission*Follow-Up Date: *12/22/2021*

12/20/2021 - POC Submission

Reviewer: *Larry Mazza*Follow-Up Type: *POC Submission*Follow-Up Date: *12/24/2021*

12/20/2021 - POC Submission

Reviewer: *Larry Mazza*Follow-Up Type: *Document Submission*Follow-Up Date: *01/17/2022*

01/26/2022 - Document Submission

Reviewer: *Larry Mazza*Follow-Up Type: *Not Required*

25c12 - Bed Hold

1. Requirements

2600.

25.c. At a minimum, the contract must specify the following:

- 12. Charges to the resident for holding a bed during hospitalization or other extended absence from the home.

Description of Violation

The resident-home contract for numerous residents, including the residents below, does not include the specific charges for holding a bed during hospitalization or other extended absence from the home:

- Resident #1's resident-home contract, dated 1/18/21
- Resident #2's resident-home contract, dated 11/12/20
- Resident #3's resident-home contract, dated 3/31/21
- Resident #4's resident-home contract, dated 7/8/20

Plan of Correction

Accept

An addendum has been added to the resident home-contract to include specific charges for holding a bed during hospitalization or other extended absence from the home. This addendum will be added, for the four residents identified, by December 30, 2021 by Personal Care Home Administrator or designee and residents will sign off on this addendum. This addendum will be added and signed off by all remaining residents by January 17, 2022. The new resident-home contract will be utilized for all new admissions effective immediately. Education regarding regulation 25c will be reviewed with personal care staff. Random audits will be conducted monthly for 3 months by the personal care home administrator or designee to ensure ongoing compliance with regulation 25c.

Document Submission

Implemented

All residents have signed the updated addendum. 4 new residents have moved into the personal care home and they signed off on the updated resident contract that includes this addendum. Audits will continue to be conducted monthly and record of these audits will be retained and scanned into this system for review.

88a - Surfaces

1. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On 12/1/21 at 10:50 a.m., the door at the emergency exit #7 stairwell does not securely close and latch into the door frame once opened.

Plan of Correction

Accept

On December 1, 2021 education was provided to personal care staff regarding regulation 88a. The door at emergency exit # 7 was immediately fixed. Education will be provided to personal care staff regarding regulation 88a on an annual basis. Random audits will be conducted weekly for 4 weeks, and then monthly for 3 months by the Personal Care Home Administrator or designee to ensure ongoing compliance with regulation 88a.

Document Submission

Implemented

audits to continue monthly for three months

89b - Hot Water Temperature

1. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On 12/1/21 at 11:16 a.m., the hot water temperature at resident #2's bathroom sink was 123.4 degrees Fahrenheit.

On 12/1/21 at 11:22 a.m., the hot water temperature at resident #5's bathroom sink was 123 degrees Fahrenheit.

Plan of Correction**Directed**

Education was provided to staff regarding regulation 89a on December 1, 2021. The hot water temperature at resident # 2, and resident #5's bathroom sinks were immediately resolved on 12/1/2021 and 12/2/2021. Audits of resident #2 and resident #5 bathroom sink water temperatures will be conducted daily for 1 week. 5 total random audits including these two rooms and 3 additional rooms will be conducted weekly for 4 weeks. Following the random audits water temperature checks will occur on an ongoing basis, per facility process, to maintain compliance with regulation 89b. Education regarding regulation 89b will be provided to staff on an annual basis.(DIRECTED: Documentation of the audits shall be kept. LM 12/20/21).

Document Submission**Implemented**

Random audits remain ongoing and documentation will be kept regarding these ongoing audits.

95 - Furniture and Equipment

1. Requirements

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

On 12/1/21 at 11:16 a.m., resident #2's bathroom sink was clogged and not draining properly.

Plan of Correction**Accept**

Education was conducted with staff regarding regulation 95 on 12/1/2021. On 12/1/2021 the sink was unclogged and the issue was immediately resolved. 5 Random audits will be conducted to ensure compliance with regulation 95 on a monthly basis for three months by personal care home administrator or designee. Staff will receive annual education regarding regulation 95.

Document Submission**Implemented**

Monthly audits will continue for two months

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

101j7 - Lighting/Operable Lamp (continued)**Description of Violation**

On 12/1/21, resident #5's bedside lamp was inoperable. No other source of lighting that could be turned on/off at bedside was present.

Plan of Correction**Accept**

Education was provided to personal care staff on December 1, 2021 regarding regulation 101.j. On December 1, 2021 the light bulb in resident #5's bedside lamp was immediately replaced and the lamp was operable. 5 random audits of resident lamps will be conducted weekly for 4 weeks, and then monthly for 3 months by Personal Care Home Administrator or designee to maintain compliance with regulation 101.j. Personal care staff will receive education regarding this regulation on an annual basis.

Document Submission**Implemented**

Audits to continue monthly for three months

162c - Menus Posted**1. Requirements**

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

On 12/1/21, the only menu posted in the home ended on 12/4/21. The following week's menu was not posted in a conspicuous and public place in the home.

Plan of Correction**Accept**

On 12/1/2021 education was provided to staff regarding regulation 162c. The menus were immediately corrected and posted properly in a conspicuous and public place within the personal care home to ensure compliance with regulation 162c. Menu postings will be audited weekly for 4 weeks, and then monthly for 3 months by Personal Care Home Administrator or designee to ensure compliance with regulation 162c. Personal care staff will receive education regarding regulation 162c annually to ensure ongoing compliance.

Document Submission**Implemented**

Audits to continue monthly for three months