

Department of Human Services
Bureau of Human Service Licensing

March 8, 2022

[REDACTED]

THE HICKMAN FRIENDS SENIOR COMMUNITY OF WEST CHESTER
400 NORTH WALNUT STREET
WEST CHESTER, PA, 19380

RE: THE HICKMAN
400 N. WALNUT STREET
WEST CHESTER, PA, 19380
LICENSE/COC#: 14093

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/27/2021, 12/29/2021, 01/03/2022, 01/05/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Claire Mendez

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 HICKMAN* License #: 14093 License Expiration: 03/13/2023
Address: 400 N. WALNUT STREET, WEST CHESTER, PA 19380
County: CHESTER Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: 484-760-6413 Email: [REDACTED]

Legal Entity

Name: *THE HICKMAN FRIENDS SENIOR COMMUNITY OF WEST CHESTER*
Address: 400 NORTH WALNUT STREET, WEST CHESTER, PA, 19380
Phone: 4847606300 Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 112 Waking Staff: 84

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: 01/05/2022

Inspection Dates and Department Representative

12/27/2021 - Off-Site: [REDACTED]
12/29/2021 - Off-Site: [REDACTED]
01/03/2022 - Off-Site: [REDACTED]
01/05/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 125 Residents Served: 72

Secured Dementia Care Unit

In Home: Yes Area: *Darlington* Capacity: 22 Residents Served: 17

Hospice

Current Residents: x

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 72
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 40 Have Physical Disability: 0

Inspections / Reviews

12/27/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 01/23/2022

Inspections / Reviews (*continued*)

01/20/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *01/25/2022*

01/24/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *02/11/2022*

03/08/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

182c - Medication Administration

1. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
3. Remove the medication from the original container.
7. Complete documentation in accordance with § 2600.187 (relating to medication records).

Description of Violation

On 12/26/2021 at 09:36 AM, staff A failed to follow the medication administration procedures of comparing the medication administration record (MAR) with the pharmacy label. The staff gave resident #1 Lorazepam 0.25 mg prescribed for resident #2 and entered the initial on resident #2's MAR.

Plan of Correction**Directed**

The Director of Resident Services or A Certified Medication Administration Trainer or Practicum Observer will complete Medication Pass Observations at least 2 times annually for all med techs per protocol of the DHS Medication Administration Program for continuous certification. Remediation will take place on an as needed basis.

Directed Plan of Correction 1/24/22 CM:

Starting 1/25/22, the Director of Resident Services or a Certified Medication Administration Trainer shall monitor the administration of medication weekly for two months then monthly for two months. Documentation of observations shall be provided to the Department.

By 2/10/22, all staff persons qualified to administer medications shall be educated by a medication train the trainer on the proper procedures for medication administration. Documentation of education shall be provided to the Department.

Document Submission**Implemented**

Please find required documentation

186b - Medication Used by Resident

1. Requirements

2600.

186.b. Prescription medications shall be used only by the resident for whom the prescription was prescribed.

Description of Violation

On 12/26/2021 at 09:35 AM, resident #1 was administered Lorazepam 0.25 mg prescribed for and belonging to resident #2.

Plan of Correction**Directed**

Sharing of medication is not acceptable. The Director of Resident Services will provide in- servicing to all med techs on the 5 Rights of Medication Administration as well as proper labeling & storage.

Directed Plan of Correction 1/24/22 CM:

186b - Medication Used by Resident (continued)

Starting 1/25/22, the Director of Resident Services or a Certified Medication Administration Trainer shall monitor the administration of medication weekly for two months then monthly for two months. Documentation of observations shall be provided to the Department.

By 2/10/22, all staff persons qualified to administer medications shall be educated by a medication train the trainer on the proper procedures for medication administration. Documentation of education shall be provided to the Department.

Document Submission

Implemented

Please find required documentation

187d - Follow Prescriber's Orders

1. Requirements

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed Lorazepam 0.5 mg gel topically every 8 hours as needed for agitation. On 12/26/2021 at 09:36 AM, resident #1's family member who was visiting asked for some pain medication on behalf of the resident. However, staff A administered resident #1 Lorazepam 0.25 mg prescribed for resident #2.

Resident #2 was admitted to the home on [REDACTED] and was prescribed vital sign checks three times a day at each shift. However, the resident's vital signs were not checked during the overnight shift on 12/23~24/2021.

Plan of Correction

Directed

All Med Techs will be provided an additional educational in service on the 5 Rights of Medication Administration and documentation protocols by 2/3/2022. Additionally, The Director of Resident Services or Certified Medication Administration Trainer will continue to observe a medication pass and MAR review for all Med Techs at least 2 times annually per DHS Medication Administration Program protocol for continued certification. Remediation and additional observations will take place on an as needed basis.

Directed Plan of Correction 1/24/22 CM:

Starting 1/25/22, the Director of Resident Services or a Certified Medication Administration Trainer shall monitor the administration of medication weekly for two months then monthly for two months. Documentation of observations shall be provided to the Department.

By 2/10/22, all staff persons qualified to administer medications shall be educated by a medication train the trainer on the proper procedures for medication administration. Documentation of education shall be provided to the Department.

Document Submission

Implemented

Please find required documentation

202 - Prohibitions

1. Requirements

202 - Prohibitions (*continued*)

2600.

202. The following procedures are prohibited:

4. A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. A chemical restraint does not include a drug ordered by a physician or dentist to treat the symptoms of a specific mental, emotional or behavioral condition, or as pretreatment prior to a medical or dental examination or treatment.

Description of Violation

Resident #1 is prescribed Lorazepam 0.5 mg gel for agitation as needed. According to the resident's December MAR, this medication was administered to resident #1 to control behaviors on 12/15/2021 at 08:07 PM and on 12/17/2021 at 06:19 AM.

Resident #2 is prescribed Lorazepam 0.25 mg for agitation as needed. According to resident #2's December MAR, this medication was administered to resident #2 to control behaviors on 12/23/2021 at 06:35 PM.

Plan of Correction**Accept**

The Director of Resident Services will provide in service training to the Nurse Managers and Med Techs with regard to appropriate diagnosis for medications and alternative methods to assist with anxiety. Additionally, monitoring the use/ frequency of PRN medications and effectiveness with follow up discussions with PCP. An immediate review of all PRN medications and diagnosis will be performed by the Director of Resident Services. The Nurse Managers will complete a weekly review of medications, accompanying diagnosis and PRN usage indicators as evidenced by signatures on the weekly re-cap paperwork from the pharmacy.

Document Submission**Implemented**

Requirements of POC