

Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY - PUBLIC

February 24, 2023

[REDACTED]  
SERENITY CARE MID VALLEY LLC  
[REDACTED]

RE: SERENITY CARE MID VALLEY  
65 STURGES ROAD  
PECKVILLE, PA, 18452  
LICENSE/COC#: 23058

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/16/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *SERENITY CARE MID VALLEY*      License #: *23058*      License Expiration: *03/28/2023*

Address: *65 STURGES ROAD, PECKVILLE, PA 18452*

County: *LACKAWANNA*      Region: *NORTHEAST*

**Administrator**

Name: [REDACTED]      Phone: [REDACTED]      Email: [REDACTED]@a.gov

**Legal Entity**

Name: *SERENITY CARE MID VALLEY LLC*

Address: [REDACTED]

Phone: [REDACTED]      Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *17*      Total Daily Staff: *72*      Waking Staff: *54*

**Inspection Information**

Type: *Partial*      Notice: *Unannounced*      BHA Docket #: [REDACTED]

Reason: *Complaint*      Exit Conference Date: *08/16/2022*

**Inspection Dates and Department Representative**

02/16/2022 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *90*      Resident Served: *38*

**Secured Dementia Care Unit**

In Home: *No*      Area: [REDACTED]      Capacity: [REDACTED]      Resident Served: [REDACTED]

**Hospice**

Current Resident: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *6*      Are 60 Years of Age or Older: *34*

Diagnosed with Mental Illness: *7*      Diagnosed with Intellectual Disability: *1*

Have Mobility Need: *17*      Have Physical Disability: *1*

**Inspections / Reviews**

02/16/2022 Partial

Lead Inspector: [REDACTED]      Follow-Up Type: *POC Submission*      Follow-Up Date: *09/16/2022*

10/06/2022 - POC Submission

Submitted By: [REDACTED]      Date Submitted: *01/12/2023*

Reviewer: [REDACTED]      Follow-Up Type: *Document Submission*      Follow-Up Date: *10/13/2022*

Inspections / Reviews *(continued)*

02/24/2023 - Document Submission

Submitted By [REDACTED]

Date Submitted: 01/12/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

187a - Medication Record

1. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #1 is prescribed melatonin 3mg once daily. On 2/6/22, this medication was not administered to Resident #1. However, the resident's medication administration record was erroneously completed to indicate that the medication was administered.

POC Submission

Accept (AG - 10/06/2022)

The MAR must accurately reflect medications and medications given. This is critical in practicing proper use of the MAR and effective medication administration procedures to meet the needs of the resident as directed by the ordering physician. On [REDACTED] 2022, the prescribed medication was omitted, however, was reflected on the MAR as administered in error. MAR audit complete on [REDACTED] 2022, determined that medication was available (filled in January 2022) but was not given. Newly trained Med Tech was provided re-education on February 7, 2022. (Attached In-service) No further repetition of non-compliance with this Med Tech since this incident. Facility Resident Care Director/LPN will continue routine audits of MARs and Med Carts on a monthly and as needed basis.

Licensee's Plan Completion Date: 09/07/2022

Implemented [REDACTED] - 02/24/2023)

187d - Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

Resident #1 is prescribed [REDACTED] [REDACTED] On 2/6/22, this medication was not administered to Resident #1.

POC Submission

Accept [REDACTED] - 10/06/2022)

It is critical for the home to maintain compliance with prescriber's orders. This ensures resident's are receiving necessary medications and treatments to provide the highest quality of care. On [REDACTED] 2022, the prescribed medication was omitted, however, was reflected on the MAR as administered in error. MAR audit complete on [REDACTED] 2022, determined that medication was available (filled in January 2022) but was not given. Newly trained Med Tech was provided re-education on February [REDACTED]. No further repetition of non-compliance with this Med Tech since this incident.

Facility Resident Care Director/LPN will continue routine audits of MARs and Med Carts on a monthly and as needed basis. Re-education's on the Medication Administration process for Med Techs continue on an annual basis and as needed.

Licensee's Plan Completion Date: 09/07/2022

Implemented [REDACTED] - 02/24/2023)