

Department of Human Services
Bureau of Human Service Licensing

August 16, 2022

[REDACTED]
EASTERN COMFORT III INC
[REDACTED]

RE: EASTERN COMFORT III
206 DIAMOND STREET
SLATINGTON, PA, 18018
LICENSE/COC#: 21677

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/17/2022 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
LICENSING INSPECTION SUMMARY

Facility Information

Name: *EASTERN COMFORT III* License #: *21677* License Expiration: *11/15/2022*
Address: *206 DIAMOND STREET, SLATINGTON, PA 18018*
County: *LEHIGH* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *EASTERN COMFORT III INC*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *01/01/2000* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *18* Working Staff: *14*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Incident* Exit Conference Date: *03/17/2022*

Inspection Dates and Department Representative

02/17/2022 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *20* Residents Served: *18*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *18* Are 60 Years of Age or Older: *15*
Diagnosed with Mental Illness: *17* Diagnosed with Intellectual Disability: *3*
Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

02/17/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/28/2022*

Inspections / Reviews (*continued*)

05/24/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/31/2022*

06/06/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/13/2022*

07/14/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/21/2022*

08/16/2022 - Document Submission

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

25a - Written Contract and Review

1. Requirements

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident’s designated person if any, prior to signature.

Description of Violation

Resident #1, admitted [redacted]/2022, did not have a resident-home contract completed until [redacted]/2022.

Plan of Correction

Accept

The administrator will ensure that when a resident arrives at the home, the administrator is there to go through and complete the home contract with the resident. The administrator will make sure that the home contract is completed within the allotted time.

Completion Date: 05/19/2022

Update: 05/24/2022

Please include a copy of a tracking system or a checklist to ensure the Home has a process for compliance of admission paperwork according t the regulations.

Document Submission

Implemented

The administrator will ensure that when a resident arrives at the home, the administrator is there to go through and complete the home contract with the resident. The administrator will make sure that the home contract is completed within the allotted time.

224c - Preadmission Screening

1. Requirements

2600.

224.c. The preadmission screening shall be completed by the administrator or designee. If the resident is referred by a State-operated facility, a county mental health and intellectual disability program, a drug and alcohol program or an area agency on aging, a representative of the referral agent may complete the preadmission screening.

Description of Violation

Resident #1 admitted to the home on [redacted]/2022 did not have a completed preadmission screening until [redacted]/2022.

Plan of Correction

Accept

The administrator will make sure that when a new resident is admitted, a preadmission screening is completed by the administrator the day of admission.

Completion Date: 05/19/2022

Update: 05/24/2022

Please include a copy of a checklist or a tracking system for admissions for Step 2 showing how the Home will track the pre admission screening documentation.

Document Submission

Implemented

The administrator will make sure that when a new resident is admitted, a preadmission screening is completed by the administrator the day of admission.

227d - Support Plan Medical/Dental

1. Requirements

2600.

227d - Support Plan Medical/Dental (*continued*)

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

The assessment for resident #1, dated [REDACTED]/2022, indicates the resident has a need for supervision and medications. The resident's support plan, dated [REDACTED]/2022 does not document a plan or how these needs will be met.

Plan of Correction**Do Not Accept**

The administrator will make sure that when a resident's support plan is being completed, or updated, that all of the necessary information is filled out correctly before being placed in a resident file.

Completion Date: 05/19/2022

Update: 05/24/2022

How will the Administrator ensure that all direct care staff and med techs know what a residents needs are as they improve or decline? What is the communication process up and down the chain of command in the home to insure that essential information is passed along regarding the resident?

This needs to be described in the Plan of Correction.

Plan of Correction**Accept**

The administrator is aware that the residents support plan should be accessible to staff at all times, so the administrator will make a binder with each resident rasp in it and put it in a private area for staff to access whenever they need to. If there are any changes that need to be made to their rasp, all staff will be notified of the changes per our communication book, which is read daily on shift change. The administrator will place an addendum with the raps regarding any essential changes that the resident requires.

Completion Date: 05/24/2022

Document Submission**Not Implemented**

The administrator is aware that the residents support plan should be accessible to staff at all times, so the administrator will make a binder with each resident rasp in it and put it in a private area for staff to access whenever they need to. If there are any changes that need to be made to their rasp, all staff will be notified of the changes per our communication book, which is read daily on shift change. The administrator will place an addendum with the raps regarding any essential changes that the resident requires. If the resident's rasp needs to be updated or is updated, the communication will be written on the RASP binder for the staff to read. The administrator will inform the the staff of any changes made to a resident's RASP, whether it be verbal, written in the communication log or noted on the RASP binder.

Update: 07/14/2022

There is no documentation to accompany this POC reg. If the resident is no longer in the home, please try to select a similar situation to demonstrate compliance. Attach in the portal for review.

[REDACTED] 7-14-22

Document Submission**Implemented**

The administrator is aware that the residents support plan should be accessible to staff at all times, so the administrator will make a binder with each resident rasp in it and put it in a private area for staff to access whenever they need to. If there are any changes that need to be made to their rasp, all staff will be notified of the changes per our communication book, which is read daily on shift change. The administrator will place an addendum with the

227d - Support Plan Medical/Dental (continued)

raps regarding any essential changes that the resident requires. If the resident's rasp needs to be updated or is updated, the communication will be written on the RASP binder for the staff to read. The administrator will inform the the staff of any changes made to a resident's RASP, whether it be verbal, written in the communication log or noted on the RASP binder.