

Department of Human Services  
Bureau of Human Service Licensing

June 22, 2022

[REDACTED]  
LAURELS SENIOR LIVING INC  
23 FAITH DRIVE  
HAZLETON, PA, 18202

RE: THE LAURELS  
23 FAITH DRIVE  
HAZLETON, PA, 18202  
LICENSE/COC#: 21117

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/23/2022, 02/28/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Michele Moskalczyk  
Human Services Licensing Supervisor

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: *THE LAURELS* License #: *21117* License Expiration: *01/13/2023*  
Address: *23 FAITH DRIVE, HAZLETON, PA 18202*  
County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

Name: [REDACTED] Phone: *5704557757* Email: [REDACTED]

**Legal Entity**

Name: *LAURELS SENIOR LIVING INC*  
Address: *23 FAITH DRIVE, HAZLETON, PA, 18202*  
Phone: *5704557757* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *04/21/2003* Issued By: *PALI*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *83* Waking Staff: *62*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint, Incident* Exit Conference Date: *03/14/2022*

**Inspection Dates and Department Representative**

02/23/2022 - On-Site: [REDACTED]  
02/28/2022 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *100* Residents Served: *79*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *3*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *79*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *4* Have Physical Disability: *0*

Inspections / Reviews

02/23/2022 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *05/19/2022*

05/25/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *06/01/2022*

06/22/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 65d - Initial Direct Care Training

## 1. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

3. Initial direct care staff person training to include the following:

- i. Safe management techniques.
- ii. ADLs and IADLs

## Description of Violation

*There was no verification that Staff Member A received training in safe management techniques, IDLs and ADLs within their first 40 hours working at the home.*

## Plan of Correction

Accept

*All staff involved in direct patient care will complete direct care staff training, including safe management techniques, ADLs and IADLs, and direct care staff training course and competency during orientation. The nursing supervisor and administrator will monitor for compliance.*

**Completion Date:** 02/24/2022

**Update:** 05/25/2022

*Please send/Attach proof of staff training. 5-25-2022 MM*

## Document Submission

Implemented

*Please send/Attach proof of staff training. 5-25-2022 MM*

## 171b4 - Staff Training

## 1. Requirements

2600.

171.b. The following requirements apply whenever staff persons or volunteers of the home provide transportation for the resident:

4. At least one staff member transporting or accompanying the residents shall have completed the initial new hire direct care staff person training as specified in § 2600.65 (relating to direct care staff training and orientation).

## Description of Violation

*On [REDACTED], Staff Member A was providing direct care for Resident 1 during a transport for an appointment. The resident was being pushed in their wheelchair by Staff Member A and fell from their wheelchair after one of the wheels got stuck in a hole in the pavement. The fall resulted with the resident being transported to the hospital with facial injuries. Documentation of Staff Member A completing direct care training and their competency test was dated 2/24/2022.*

## Plan of Correction

Accept

*All staff involved in direct patient care will complete direct care staff training, including safe management techniques, ADLs and IADLs, and direct care staff training course and competency during orientation. The nursing supervisor and administrator will monitor for compliance.*

**Completion Date:** 02/24/2022

**Update:** 05/25/2022

*Please send/Attach proof of staff training. 5-25-2022 MM*

## Document Submission

Implemented

*Please send/Attach proof of staff training. 5-25-2022 MM*

227d - Support Plan Medical/Dental

1. Requirements

2600.

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 RASP dated [redacted] for Resident 1 was reviewed [redacted] and was not updated to reflect Hospice services that were started [redacted]

Plan of Correction

Accept

Residents requiring hospice services will have an updated RASP within five days to reflect a change in care needs. The nursing supervisor and administrator will monitor for compliance.

Completion Date: 02/24/2022

Update: 05/25/2022

Please send/Attach proof of resident 1's RASP. 5-25-22 MM

Document Submission

Implemented

Please send/Attach proof of resident 1's RASP. 5-25-22 MM