

Department of Human Services
Bureau of Human Service Licensing

July 26, 2022

[REDACTED], OWNER/ADMINISTRATOR
[REDACTED]
[REDACTED]

RE: TWIN OAKS PERSONAL CARE
HOME
1100 COWLEY RD
GRANVILLE SUMMIT, PA, 16926
LICENSE/COC#: 21470

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/31/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]
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: *TWIN OAKS PERSONAL CARE HOME* License #: *21470* License Expiration: *04/20/2023*
Address: *1100 COWLEY RD, GRANVILLE SUMMIT, PA 16926*
County: *BRADFORD* Region: *NORTHEAST*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *05/18/2060* Issued By: *Code Inspector*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *19* Waking Staff: *14*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *03/31/2022*

Inspection Dates and Department Representative

03/31/2022 - On-Site: Pamela Harris

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *24* Residents Served: *18*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

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

Inspections / Reviews

03/31/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/04/2022*

Inspections / Reviews (*continued*)

06/23/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *06/29/2022*

07/26/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

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.

Description of Violation

Resident #1, who resides in Room [REDACTED] closest to the window, does not have an operable lamp or other source of light that could be turned on at bedside.

Plan of Correction

Accept

THE RESIDENT HAD A LAMP ON [REDACTED] BEDSTAND, HOWEVER [REDACTED] HAD MOVED THE STAND TO OUT OF [REDACTED] REACH. THE STAND AND LAMP WERE PLACED BACK WITH IN REACH AND RESIDENT WAS INSTRUCTED THAT REGULATIONS REQUIRE THAT IT REMAIN THERE. ADMINISTRATOR WILL ENSURE ONGOING COMPLIANCE.

Completion Date: 03/31/2022

Update: 06/23/2022

Please send proof of compliance (picture).

Document Submission

Implemented

THE RESIDENT HAD A LAMP ON [REDACTED] BEDSTAND, HOWEVER [REDACTED] HAD MOVED THE STAND TO OUT OF [REDACTED] REACH. THE STAND AND LAMP WERE PLACED BACK WITH IN REACH AND RESIDENT WAS INSTRUCTED THAT REGULATIONS REQUIRE THAT IT REMAIN THERE. ADMINISTRATOR WILL ENSURE ONGOING COMPLIANCE.

103i - Outdated Food

1. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

Located in the pantry in the kitchen was a #10 can of green beans that was dented.

Plan of Correction

Accept

A NUMBER 10 CAN OF GREEN BEANS HAD A SLIGHT DENT ON THE TOP RIM. IT WAS REMOVED FROM THE PREMISES ON THE DAY OF INSPECTION. IT WAS AN OVERSIGHT AND STAFF WAS RE-EDUCATED ON THIS REGULATION. ADMINISTRATOR WILL ENSURE ONGOING COMPLIANCE.

Completion Date: 03/31/2022

Update: 06/23/2022

Please send proof of staff training.

Document Submission

Implemented

A NUMBER 10 CAN OF GREEN BEANS HAD A SLIGHT DENT ON THE TOP RIM. IT WAS REMOVED FROM THE PREMISES ON THE DAY OF INSPECTION. IT WAS AN OVERSIGHT AND STAFF WAS RE-EDUCATED ON THIS REGULATION. ADMINISTRATOR WILL ENSURE ONGOING COMPLIANCE.

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

183e - Storing Medications (continued)

Description of Violation

Resident #2 is prescribed [REDACTED] daily at 8am. The home did not have documentation when the inhaler was opened.

Plan of Correction

Accept

THIS WAS AN INSULIN PEN, NOT AN INHALER. THE PEN WAS DISCARDED AND A NEW ONE WAS OPENED AND DOCUMENTED CORRECTLY ON THE DAY OF INSPECTION. STAFF WAS RE-EDUCATED ON THE IMPORTANCE AND REGULATION OF LABELING ALL INSULIN PENS WHEN OPENED: RESIDENT NAME, DATE, & STAFF INITIALS. ADMINSTRATOR WILL ENSURE ONGOING COMPLIANCE.

Completion Date: 03/31/2022

Update: 06/23/2022

Please send proof of staff training.

Document Submission

Implemented

THIS WAS AN INSULIN PEN, NOT AN INHALER. THE PEN WAS DISCARDED AND A NEW ONE WAS OPENED AND DOCUMENTED CORRECTLY ON THE DAY OF INSPECTION. STAFF WAS RE-EDUCATED ON THE IMPORTANCE AND REGULATION OF LABELING ALL INSULIN PENS WHEN OPENED: RESIDENT NAME, DATE, & STAFF INITIALS. ADMINSTRATOR WILL ENSURE ONGOING COMPLIANCE.