

Department of Human Services
Bureau of Human Service Licensing

November 2, 2022

[REDACTED]
WRC PENNSYLVANIA MEMORIAL HOME

RE: LAURELBROOKE PERSONAL CARE
133 LAURELBROOKE DRIVE
BROOKVILLE, PA, 15825
LICENSE/COC#: 42463

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/12/2022, 04/13/2022, 04/18/2022 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

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

Facility Information

Name: LAURELBROOKE PERSONAL CARE License #: 42463 License Expiration: 03/02/2023
Address: 133 LAURELBROOKE DRIVE, BROOKVILLE, PA 15825
County: JEFFERSON Region: WESTERN

Administrator

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

Legal Entity

Name: WRC PENNSYLVANIA MEMORIAL HOME
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

[REDACTED] of Occupancy

Type: I-1 Date: 04/13/2011 Issued By: Borough of Brookeville

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 51 Waking Staff: 38

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 04/18/2022

Inspection Dates and Department Representative

04/12/2022 - On-Site: [REDACTED]
04/13/2022 - Off-Site: [REDACTED]
04/18/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 50 Residents Served: 33

Secured Dementia Care Unit

In Home: Yes Area: Harmony Capacity: 20 Residents Served: 11

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 33
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 18 Have Physical Disability: 1

Inspections / Reviews

04/12/2022 - Partial

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow Up Date: *05/26/2022*

07/26/2022 POC Submission

Submitted By: [REDACTED] Date Submitted: *09/19/2022*
Reviewer: [REDACTED] Follow Up Type: *Document Submission* Follow Up Date: *08/02/2022*

11/02/2022 Document Submission

Submitted By: [REDACTED] Date Submitted: *09/19/2022*
Reviewer: [REDACTED] Follow Up Type: *Not Required*

187d - Follow Prescriber's Orders

1. Requirements

2600.

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

Description of Violation

On [REDACTED]/22, resident #1 was prescribed hourly checks for safety. However, based on multiple staff interviews, resident #1 was not checked on hourly on [REDACTED]/22, at [REDACTED] am.- [REDACTED] am.

POC Submission

Accept

Resident #1 was discharged on [REDACTED]/22. All Med Tech staff shall be educated on regulation 187.d. on 5/26/22 by the Administrator or [REDACTED] designee. An audit of all non medication orders will be conducted by the Assistant Administrator by 6/15/2022 to ensure they are being followed. Starting in July 2022, the Administrator or [REDACTED] designee shall conduct a monthly audit for 4 months to ensure non medication orders are being followed. Documentation to be kept on site.

Licensee's Proposed Overall Completion Date: 06/15/2022

Document Submission

Implemented (JW - 11/02/2022)

Resident #1 was discharged on [REDACTED]/22. All Med Tech staff shall be educated on regulation 187.d. on 5/26/22 by the Administrator or [REDACTED] designee. An audit of all non medication orders will be conducted by the Assistant Administrator by 6/15/2022 to ensure they are being followed. Starting in July 2022, the Administrator or [REDACTED] designee shall conduct a monthly audit for 4 months to ensure non medication orders are being followed. Documentation to be kept on site.

Licensee's Proposed Overall Completion Date: 09/19/2022

225c - Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #1's assessment, dated [REDACTED]/21, does not include the resident's need for activities of daily living services (ADL), including assistance in feeding, drinking, transferring, ambulating, hourly safety check and 2-hour repositioning.

Repeat violation on 12/21/21, et all

POC Submission

Accept

Resident #1 was discharged on [REDACTED]/22. All staff person responsible for completing resident assessments shall be educated on regulation 2600.225.c. Documentation shall be kept. The resident care coordinator completed an audit on 4/25/2022 of all resident assessments to ensure each resident assessment is updated accurately to current ADL need. On 4/29/2022 Administrator, Assistant Administrator, and Resident Care Coordinator were educated on regulation 2600.225.c. Beginning June 2022 Administration will complete a monthly audit of assessment needs according to regulation 2600.225.c. to ensure all assessments are current to all ADL needs. Documentation to be kept.

Licensee's Proposed Overall Completion Date: 06/01/2022

225c - Additional Assessment (*continued*)**Document Submission****Implemented (JW - 11/02/2022)**

Resident #1 was discharged on [REDACTED]/22. All staff person responsible for completing resident assessments shall be educated on regulation 2600.225.c. Documentation shall be kept.

The resident care coordinator completed an audit on 4/25/2022 of all resident assessments to ensure each resident assessment is updated accurately to current ADL need.

On 4/29/2022 Administrator, Assistant Administrator, and Resident Care Coordinator were educated on regulation 2600.225.c. Beginning June 2022 Administration will complete a monthly audit of assessment needs according to regulation 2600.225.c. to ensure all assessments are current to all ADL needs. Documentation to be kept.

Licensee's Proposed Overall Completion Date: 09/19/2022