

Department of Human Services  
Bureau of Human Service Licensing

August 26, 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 04/20/2022, 04/22/2022, 04/25/2022, 04/29/2022 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**

**Staffing Hours**

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

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint* Exit Conference Date: *05/04/2022*

**Inspection Dates and Department Representative**

04/20/2022 On Site [REDACTED]  
04/22/2022 Off Site [REDACTED]  
04/25/2022 Off Site [REDACTED]  
04/29/2022 Off Site [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *20* Residents Served: *19*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *19* Are 60 Years of Age or Older: *17*  
Diagnosed with Mental Illness: *14* Diagnosed with Intellectual Disability: *3*  
Have Mobility Need: *0* Have Physical Disability: *1*

## Inspections / Reviews

04/20/2022 - Partial

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

06/06/2022 - POC Submission

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

06/15/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/22/2022*

07/19/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/26/2022*

08/26/2022 - Document Submission

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

## 51 - Criminal Background Check

## 1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

## Description of Violation

Direct care staff member B hired [REDACTED]/22 Pennsylvania State Police Criminal Background Check completed on [REDACTED]/22 notes "request under review". The staff member has worked unsupervised in the home.

Direct care staff member C hired [REDACTED]/22 did not have a Pennsylvania State Police Criminal Background Check completed. The staff member has worked unsupervised in the home.

## Plan of Correction

Accept

The administrator will ensure that all background checks are completed for every employee at Eastern Comfort III nc. before they are allowed to work in the facility. The administrator will also ensure that all of the background checks come back completed, they will then be filed in employees file.

Completion Date: 05/24/2022

## Document Submission

Implemented

The administrator will ensure that all background checks are completed for every employee at Eastern Comfort III nc. before they are allowed to work in the facility. The administrator will also ensure that all of the background checks come back completed, they will then be filed in employees file.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

## 63a - First Aid/CPR Training

## 1. Requirements

2600.

- 63.a. At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.

## Description of Violation

The home serves 19 residents. On [REDACTED]/22 from [REDACTED] a-p no staff members working in the home were certified in First Aid and CPR. From approximately [REDACTED] p-a no one was certified in First Aid working in the home.

## Plan of Correction

Accept

The administrator shall ensure that all of the staff members are certified in CPR & First aid before they work on a shift unsupervised. The administrator will also ensure that there is always a CPR & First Aid certified staff member on every shift.

Completion Date: 05/24/2022

## Document Submission

Not Implemented

The administrator shall ensure that all of the staff members are certified in CPR & First aid before they work on a shift unsupervised. The administrator will also ensure that there is always a CPR & First Aid certified staff member on every shift.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

63a - First Aid/CPR Training (continued)

Update: 07/19/2022

no verifications were attached for this violation.

█, 7-19-22

Document Submission

Implemented

The administrator shall ensure that all of the staff members are certified in CPR & First aid before they work on a shift unsupervised. The administrator will also ensure that there is always a CPR & First Aid certified staff member on every shift.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

65a - FS Orientation 1st Day

1. Requirements

2600.

65.a. Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

1. Evacuation procedures.
2. Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
3. The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
4. Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
5. The location and use of fire extinguishers.
6. Smoke detectors and fire alarms.
7. Telephone use and notification of emergency services.

Description of Violation

Direct care staff member C hired █/22 did not complete the 1st day fire safety orientation.

Plan of Correction

Do Not Accept

The administrator shall ensure that all of the staff members that are employed at Eastern Comfort III Inc. go through and receive and complete the state regulation first day trainings before they are allowed to work alone.

Completion Date: 05/24/2022

Update: 06/06/2022

Employee c may not work until the necessary training is completed.

█, 6 6 22

Plan of Correction

Accept

The administrator shall ensure that all of the staff members that are employed at Eastern Comfort III Inc. go through and receive and complete the state regulation first day trainings before they are allowed to work alone. Employees are not permitted to work until all of their trainings are completed. The former operator has been legally removed from the facility on 6/3/2022, and the previous owner took over possession of the facility

Completion Date: 06/08/2022

Document Submission

Not Implemented

The administrator shall ensure that all of the staff members that are employed at Eastern Comfort III Inc. go

65a - FS Orientation 1st Day (continued)

through and receive and complete the state regulation first day trainings before they are allowed to work alone. Employees are not permitted to work until all of their trainings are completed.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

Update: 07/19/2022

no verifications were attached for this violation.

█, 7-19-22

Document Submission

Implemented

The administrator shall ensure that all of the staff members that are employed at Eastern Comfort III Inc. go through and receive and complete the state regulation first day trainings before they are allowed to work alone. Employees are not permitted to work until all of their trainings are completed.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

65b - Rights/Abuse 40 Hours

1. Requirements

2600.

65.b. Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

1. Resident rights.
2. Emergency medical plan.
3. Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102).
4. Reporting of reportable incidents and conditions.

Description of Violation

Direct care staff member C hired █/22 did not complete training in resident rights, The Older Adult Protective Services Act, emergency medical plan, and reporting of reportable incidents and conditions within the first 40 hours worked.

Plan of Correction

Do Not Accept

The administrator will ensure that all of the staff employed at Eastern Comfort III Inc. receive and complete their state regulation trainings within their scheduled 40 working hours; employee will not be permitted to work until the trainings are complete.

Completion Date: 05/24/2022

Update: 06/06/2022

Employee C may not work until the necessary training topics are completed.

█, 6-6-22

## 65b - Rights/Abuse 40 Hours (continued)

**Plan of Correction****Accept**

*The administrator will ensure that all of the staff employed at Eastern Comfort III Inc. receive and complete their state regulation trainings within their scheduled 40 working hours; employee will not be permitted to work until the trainings are complete. The employees are not permitted to work until their trainings are completed. The former operator has been legally removed from the facility on 6/3/2022. The previous owner took over possession the facility.*

**Completion Date:** 06/08/2022

**Document Submission****Not Implemented**

*The administrator will ensure that all of the staff employed at Eastern Comfort III Inc. receive and complete their state regulation trainings within their scheduled 40 working hours; employee will not be permitted to work until the trainings are complete. The employees are not permitted to work until their trainings are completed.*

*The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.*

**Update:** 07/19/2022

*no verifications were attached for this violation.*

█, 7-19-22

**Document Submission****Implemented**

*The administrator will ensure that all of the staff employed at Eastern Comfort III Inc. receive and complete their state regulation trainings within their scheduled 40 working hours; employee will not be permitted to work until the trainings are complete. The employees are not permitted to work until their trainings are completed.*

*The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.*

## 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:

2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

**Description of Violation**

*Direct care staff member C hired █/22 did not complete the Department approved online direct care competency course.*

**Plan of Correction****Do Not Accept**

*The administrator will ensure that all the staff members take and successfully complete and pass the department approved direct care training competency test before they are hired. The competency test will then be filed in the employee's personal file.*

**Completion Date:** 05/24/2022

**Update:** 06/06/2022

*Employee C may not work until the training is completed and the competency course is completed and passed and the certificate is maintained by the home.*

65d - Initial Direct Care Training (continued)

6-6-22

Plan of Correction

Accept

The administrator will ensure that all the staff members take and successfully complete and pass the department approved direct care training competency test before they are hired. The competency test will then be filed in the employee's personal file, and maintained by the home. Employees are not permitted to work until their necessary trainings, and competency test is completed. The former owner has been legally removed from the facility on 6/3/2022. The previous owner took over possession of the facility.

Completion Date: 06/08/2022

Document Submission

Not Implemented

The administrator will ensure that all the staff members take and successfully complete and pass the department approved direct care training competency test before they are hired. The competency test will then be filed in the employee's personal file, and maintained by the home. Employees are not permitted to work until their necessary trainings, and competency test is completed.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

Update: 07/19/2022

no verifications were attached for this violation.

7-19-22

Document Submission

Implemented

The administrator will ensure that all the staff members take and successfully complete and pass the department approved direct care training competency test before they are hired. The competency test will then be filed in the employee's personal file, and maintained by the home. Employees are not permitted to work until their necessary trainings, and competency test is completed.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

182b - Prescription Medication

1. Requirements

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

1. A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
2. A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
3. A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
4. A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Description of Violation

Direct care staff members B & C administered medications to Resident #1,2,3, 4, 5, 6, 7 & 8 on /22. The staff members did not complete the medication administration training.

182b - Prescription Medication (continued)

Plan of Correction

Do Not Accept

The administrator will ensure that only medication certified staff members will be allowed to administer medications to the residents. The operator of the facility will not be allowed to administer medications. Only Certified Medication technicians on shift are permitted to administer medications to the residents. The remaining staff that were not medication certified, took the medication class/test on 4/21/2022.

Completion Date: 05/24/2022

Update: 06/06/2022

Direct Care Staff members B & C may not pass medications until they successfully complete the med training course and the home maintains their med training documentation on file.

6-6-22

Plan of Correction

Accept

The administrator will ensure that only medication certified staff members will be allowed to administer medications to the residents. The operator of the facility will not be allowed to administer medications. Only Certified Medication technicians on shift are permitted to administer medications to the residents. The remaining staff that were not medication certified, took the medication class/test on 4/21/2022. The home will continue to maintain and update medication trainings as required by DHS. The former owner has been legally removed from the facility on 6/3/2022. The previous owner took over possession of the facility.

Completion Date: 06/08/2022

Document Submission

Implemented

The administrator will ensure that only medication certified staff members will be allowed to administer medications to the residents. The operator of the facility will not be allowed to administer medications. Only Certified Medication technicians on shift are permitted to administer medications to the residents. The remaining staff that were not medication certified, took the medication class/test on 4/21/2022. The home will continue to maintain and update medication trainings as required by DHS.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

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:

- 14. Name and initials of the staff person administering the medication.

Description of Violation

Direct care staff members B & C administered pm medications to Resident #1 on /22. The staff members used Direct care staff member E's initials and login to initial the EMARS.

Operator A did not administer medications to Resident #2 ,3, 4, 5, 6, 7 & 8 on /22 at pm. The Operator went back into the EMARS and used the Operators initials as though the Operator administered the medications.

Plan of Correction

Accept

The administrator shall ensure that all medication certified staff has their own personal log in for the EMAR, All

187a - Medication Record (continued)

employees MUST use only their own log in while administering medications.

The administrator will hold a mandatory in service to educate the staff regarding the importance of not sharing their log INS and inform them that the consequences of sharing their log in would be grounds for termination.

If anyone is caught falsifying initials on the EMAR system, they will be terminated immediately.

Completion Date: 05/24/2022

Document Submission

Not Implemented

The administrator shall ensure that all medication certified staff has their own personal log in for the EMAR, All employees MUST use only their own log in while administering medications.

The administrator will hold a mandatory in service to educate the staff regarding the importance of not sharing their log INS and inform them that the consequences of sharing their log in would be grounds for termination.

If anyone is caught falsifying initials on the EMAR system, they will be terminated immediately.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

Update: 07/19/2022

no verifications were attached for this violation.

7-19-22

Document Submission

Implemented

The administrator shall ensure that all medication certified staff has their own personal log in for the EMAR, All employees MUST use only their own log in while administering medications.

The administrator will hold a mandatory in service to educate the staff regarding the importance of not sharing their log INS and inform them that the consequences of sharing their log in would be grounds for termination.

If anyone is caught falsifying initials on the EMAR system, they will be terminated immediately.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

The home submitted an incident report to The Department on /22 which notes the following: On Sunday, 2022, at pm the homes Operator staff person A was handing out the evening medications. In the process of handing out medications, the operator accidentally gave Resident #1 the wrong medications. Operator A immediately called the doctor to figure out what the operator should do, and the doctor informed the operator to give Resident #1 plenty of water. The Operator gave Resident #1 two glasses of water. Around pm Resident #1 ended up throwing up.

16c - Written Incident Report (continued)

Operator A and Direct care staff member B helped clean the resident and had the resident sit down at the table. At ██████ p Resident #1 was eating a biscuit, and began choking on it, and it was stuck in the residents throat. Direct care staff member B called 9-1-1. The ambulance came and took the resident to ██████ Campus.

Statements from Operator A and Direct care staff member B were also submitted with the incident report. The signed statements from the staff members note the above incident.

Multiple staff and resident interviews were conducted on ██████/22 during the Departments on-site investigation. Staff and resident interviews indicated that Operator A did not work on ██████/22 and did not administer the wrong medications to Resident #1.

This writer interviewed the home's Operator staff member A at approximately ██████ am. Operator A reported the following: Operator A was completing the ██████ pm medication pass and accidentally gave Resident #1 Resident #9's medications. The Operator immediately called the doctor, the doctor told the Operator Resident #1 should drink water and send the resident out to the hospital. The Operator gave Resident #1 water to drink and then the resident started to choke on a biscuit. The resident vomited at some point but the Operator was uncertain if it was before or after the resident ate the biscuit. At the time, the Operator was very worked up because Resident #1 had gotten the wrong medications. Direct care staff member B was working with Operator and called 911.

At approximately ██████ pm Operator A was re-interviewed by this writer. At this time Operator A continued to insist that the Operator worked on ██████/22 and the Operator didn't care what other staff and residents told this writer, Direct care staff member B would back the Operators story up. A few minutes later the Operator then reported the following: the Operator did not work on ██████/22 and did not administer the wrong medications to Resident #1. Direct care staff member B & C administered the incorrect medications and are not trained to do so.

Operator A falsified information to the homes Administrator, staff member D who submitted the incident report to the Department, which included the falsified witness statements from the Operator and Direct care staff member B.

Repeat Violation: 9/22/21

**Plan of Correction**

**Accept**

The administrator will ensure that before an incident report is submitted to the department of state, a thorough nvestigation is done and that all of the information given is completely truthful and accurate to the events that occurred at the time of the incident. Eastern Comfort III INC is currently working on changing ownership of this facility.

**Completion Date:** 05/24/2022

**Document Submission**

**Not Implemented**

The administrator will ensure that before an incident report is submitted to the department of state, a thorough nvestigation is done and that all of the information given is completely truthful and accurate to the events that occurred at the time of the incident. Eastern Comfort III INC is currently working on changing ownership of this facility.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

16c - Written Incident Report (continued)

Update: 07/19/2022

no verifications were attached for this violation.

7-19-22

Document Submission

Implemented

The administrator will ensure that before an incident report is submitted to the department of state, a thorough investigation is done and that all of the information given is completely truthful and accurate to the events that occurred at the time of the incident. Eastern Comfort III INC is currently working on changing ownership of this facility.

The former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the facility.

187d - Follow Prescriber's Orders

1. Requirements

2600.

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

Description of Violation

Resident #1 was administered Resident #9's pm medications on /22.

Repeat violation: 9/22/21

Plan of Correction

Accept

The administrator shall ensure that all staff that is Medication Certified will follow the prescriber's orders while giving medications. Staff must be observant/ mindful while administering medications.

The administrator shall hold a mandatory staff meeting regarding the correct steps of medication administration.

Completion Date: 05/24/2022

Document Submission

Not Implemented

The administrator shall ensure that all staff that is Medication Certified will follow the prescriber s orders while giving medications. Staff must be observant/ mindful while administering medications.

The administrator shall hold a mandatory staff meeting regarding the correct steps of medication administration.

he former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the acility.

Update: 07/19/2022

no verifications were attached for this violation.

7-19-22

Document Submission

Implemented

The administrator shall ensure that all staff that is Medication Certified will follow the prescriber s orders while giving medications. Staff must be observant/ mindful while administering medications.

The administrator shall hold a mandatory staff meeting regarding the correct steps of medication administration.

he former operator has been legally removed from the facility on 6/3/2022. The previous owner has taken over the acility.