

Department of Human Services
Bureau of Human Service Licensing

October 24, 2022

[REDACTED]

HERITAGE MILLS PERSONAL CARE CENTER LLC

[REDACTED]

RE: HERITAGE MILLS PERSONAL CARE
CENTER
846 EAST WICONISCO AVENUE
TOWER CITY, PA, 17980
LICENSE/COC#: 22636

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/29/2022, 05/02/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Anne Graziano

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: *HERITAGE MILLS PERSONAL CARE CENTER* License #: *22636* License Expiration: *10/05/2022*
Address: *846 EAST WICONISCO AVENUE, TOWER CITY, PA 17980*
County: *SCHUYLKILL* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *HERITAGE MILLS PERSONAL CARE CENTER LLC*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *03/28/2002* Issued By: *Tower City Borough*

Staffing Hours

Resident Support Staff: Total Daily Staff: *43* Waking Staff: *32*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *05/02/2022*

Inspection Dates and Department Representative

04/29/2022 - Off-Site: [REDACTED]
05/02/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* Residents Served: *29*

Secured Dementia Care Unit

In Home: *Yes* Area: *2nd floor* Capacity: *30* Residents Served: *14*

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *29*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *14* Have Physical Disability: *0*

Inspections / Reviews

04/29/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/02/2022*

06/23/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/30/2022*

07/22/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/29/2022*

10/24/2022 - Document Submission

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

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted] /2022 at [redacted] resident #1 and resident #2 had an altercation in which resident #1 physically struck resident #2 [redacted]. The home submitted an incident report to BHSL on [redacted] /2022. The [redacted] /2022 incident report indicates the provider did report the incident to the Schuylkill County Senior Services (Aging)Office on [redacted] /2022. According to the home's administrator there is no documentation in resident#1 or #2's record to indicate the provider completed the required Act 13 form and sent it to the County Senior Services (Aging) office.

On [redacted] /2022 at [redacted] resident #3 and resident #1 had an altercation in which resident #3 struck resident #1 causing [redacted] An incident report was submitted to BHSL on [redacted] /2022. The [redacted] /2022 incident report indicates the provider did report the incident to the Schuylkill County Senior Services (Aging)Office on [redacted] /2022. According to the home's administrator there is no documentation in resident#1 or #3's record to indicate that the provider completed the required Act 13 form and sent it to the County Senior Services (Aging) office. Schuylkill County Senior Services Office Protective Services worker was contacted on [redacted] 2022 and confirmed the above two incidents were reported on [redacted] /2022 but no completed Act 13 forms had been received.

Plan of Correction

Do Not Accept

Current Administrator completed ACT13 forms and sent them to Area on Aging. Moving forward to stay in compliance with regulation 2600.15a: Administrator, Assistant Administrator and Director of Wellness will be retrained on OAPSA Act 13 and will report all suspected abuse of residents in accordance with OAPSA Act 13 effective immediately. Please see attached documents.

Completion Date: 05/26/2022

Update: 06/23/2022

Who will be responsible with the reporting going forward to maintain compliance and how will the timeframes be maintained during non-business hours such as nights, weekends and holidays?

AG, 6-23-22

Plan of Correction

Accept

Current Administrator completed ACT13 forms and sent them to Area on Aging. Moving forward to stay in compliance with regulation 2600.15a: Administrator, Assistant Administrator and Director of Wellness will be retrained on OAPSA Act 13 and will report all suspected abuse of residents in accordance with OAPSA Act 13 effective immediately. Please see attached documents.

Administrator will be responsible for abuse reporting during normal business hours.

Assistant Administrator will be responsible for abuses reporting when the Administrator is unavailable.

Director of Wellness is responsible for abuse reporting during non-business hours such as nights weekends and holiday's unless the Administrator or Assistant Administrator is covering on-call for Director of Wellness.

Completion Date: 06/24/2022

15a - Resident Abuse Report (continued)

Update: 07/22/2022

Please note in Step 2 that documents were reviewed and accepted in Step 1 by AG.
AG, 7-22-22

Document Submission

Implemented

Current Administrator completed ACT13 forms and sent them to Area on Aging. Moving forward to stay in compliance with regulation 2600.15a: Administrator, Assistant Administrator and Director of Wellness will be retrained on OAPSA Act 13 and will report all suspected abuse of residents in accordance with OAPSA Act 13 effective immediately. Please see attached documents.

Administrator will be responsible for abuse reporting during normal business hours.

Assistant Administrator will be responsible for abuses reporting when the Administrator is unavailable.

Director of Wellness is responsible for abuse reporting during non-business hours such as nights weekends and holiday's unless the Administrator or Assistant Administrator is covering on-call for Director of Wellness.

234d - Support Plan Revision

1. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

Resident #1's support plan dated [redacted]/2022 was not updated to indicate resident #1 requires half -hour safety checks which according to the home's administrator went into effect around [redacted]/2022. Two separate incident reports submitted to BHSL on [redacted]/22 for incidents on [redacted]/22 and [redacted]/22 for resident #1 indicate "all staff aware to continue half-hour safety checks."

Plan of Correction

Do Not Accept

Moving forward to stay in compliance with regulation 2600.234d Current Administrator, Assistant Administrator and Director of Wellness will revise RASPS with addendum sheet as needed or whole new rasp annually or for significant changes by using RASP tracker. Effective immediately. Please see attached documents.

Completion Date: 05/26/2022

Update: 06/23/2022

The Tracker has to be updated to show the work done to date. A blank for is not acceptable. The POC has to identify who will be responsible for implementing the plan going forward.

Please show the updated work on the tracker in Step 2.

AG, 6-23-22

234d - Support Plan Revision (continued)**Plan of Correction****Accept**

Moving forward to stay in compliance with regulation 2600.234d Current Administrator, Assistant Administrator and Director of Wellness will revise RASPS with addendum sheet as needed or whole new rasp annually or for significant changes by using RASP tracker. Effective immediately. Please see attached documents.

Completion Date: 06/24/2022

Update: 07/22/2022

Please note in Step 2 that documents were reviewed and accepted in Step 1 by AG.

Please send in a copy of the Tracker that is IN USE in Step 2.

AG, 7-22-22

Document Submission**Implemented**

Moving forward to stay in compliance with regulation 2600.234d Current Administrator, Assistant Administrator and Director of Wellness will revise RASPS with addendum sheet as needed or whole new rasp annually or for significant changes by using RASP tracker. Effective immediately. Please see attached documents.