

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

April 3, 2023

[REDACTED], PRESIDENT  
EMBASSY MERCER LLC

RE: THE LAKES AT JEFFERSON  
7271 WEST MARKET STREET  
MERCER, PA, 16137  
LICENSE/COC#: 45151

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/09/2022 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

**Facility Information**

**Name:** THE LAKES AT JEFFERSON      **License #:** 45151      **License Expiration:** 08/04/2023

**Address:** 7271 WEST MARKET STREET, MERCER, PA 16137

**County:** MERCER      **Region:** WESTERN

**Administrator**

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

**Legal Entity**

**Name:** EMBASSY MERCER LLC

**Address:** [REDACTED]

[REDACTED] of Occupancy

**Type:** / 1      **Date:** 06/01/2022      **Issued By:** Jefferson County

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 59      **Waking Staff:** 44

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**

**Reason:** Interim      **Exit Conference Date:** 09/09/2022

**Inspection Dates and Department Representative**

09/09/2022 On Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 69      **Residents Served:** 54

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 0

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 52

**Diagnosed with Mental Illness:** 2      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 5      **Have Physical Disability:** 1

**Inspections / Reviews**

09/09/2022 - Partial

**Lead Inspector:** [REDACTED]      **Follow Up Type:** POC Submission      **Follow Up Date:** 10/09/2022

Inspections / Reviews (*continued*)

## 12/16/2022 POC Submission

Submitted By: [REDACTED] Date Submitted: 01/20/2023  
Reviewer: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 12/20/2022

## 01/12/2023 POC Submission

Submitted By: [REDACTED] Date Submitted: 01/20/2023  
Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 01/19/2023

## 04/03/2023 Document Submission

Submitted By: [REDACTED] Date Submitted: 01/20/2023  
Reviewer: [REDACTED] Follow Up Type: Not Required

## 141a - Medical Evaluation

## 1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

## Description of Violation

Resident #1, admitted [REDACTED], did not have a medical evaluation completed.

## POC Submission

Accept ( [REDACTED] - 12/16/2022)

All medical charts were checked by director of wellness for completion. Director of wellness will complete all medical evaluations within 60 days prior to within 30 days after admission. Charts will be checked monthly for completion and reviewed at monthly QA meeting. Nursing staff will be in serviced on 10/18/2022 at the staff meeting on medical

Evaluations by the DOW. Medical Director will be in the building every second Wednesday of the month for new Admissions. This process started on 2/9/2022 and will continue monthly forward. Resident #1 will have a medical evaluation completed by a physician, physician's assistant or Certified registered nurse practitioner on 10/12/2022

Licensee's Plan Completion Date: 10/08/2022

Implemented ( [REDACTED] - 04/03/2023)

## 190a - Completion Medication Course

## 2. Requirements

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

## Description of Violation

Staff person A, who has not successfully completed the Department-approved medications administration course, administered medications to residents to include the following:

Resident #1, prescribed [REDACTED], 1 tablet by mouth every 12 hours for cerebral infraction on [REDACTED], and [REDACTED].

Resident #3, prescribed [REDACTED], 1 tablet by mouth one time a day from [REDACTED], at [REDACTED].

## Plan of Correction

Accept ( [REDACTED] - 01/12/2023)

See attached. Staff Person A completed medication Administration course on September 10th, 2022. All staff charts will be monitored by the Director of Wellness in conjunction with the Executive Director for all training needs. Staff will be in serviced at the monthly nursing meeting on 12/29/2022 and findings reviewed with the administrator and Director of Wellness.

Licensee's Proposed Overall Completion Date: 12/29/2022

Implemented ( [REDACTED] - 04/03/2023)

225a - Assessment 15 Days

3. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department’s assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

An assessment was not completed for resident #1, who was admitted to the home on [REDACTED].

An assessment was not completed for resident #4, who was admitted to the home on [REDACTED].

Plan of Correction

Directed [REDACTED] - 01/12/2023)

All assessments will be checked by the director of wellness monthly for 6 months and reviewed at monthly QA meeting. All nursing staff will be in serviced on 12/29/2022 on annual assessments. Charts will be checked monthly for accuracy and completion by the Director of Wellness and Administrator the attached is resident list and dates of compliance will be utilized for all current and new residents. DOW and Administrator will use a monthly alphabetical index card rolodex to inform us yearly DME is compliant for the prior month. See attached.

Directed Plan:

Resident #1 had an assessment completed on [REDACTED] 1/12/23

By 1/15/23: The administrator or designee shall complete an assessment for resident #4 (if still a resident at the home) and place the finished assessment in the resident's record. [REDACTED] 1/12/23

Directed Completion Date: 12/29/2022

Implemented [REDACTED] - 04/03/2023)

227a - Support Plan 30 Days

4. Requirements

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department’s support plan form.

Description of Violation

Resident #1, was admitted on [REDACTED]; however, the resident’s initial support plan was not completed.

Plan of Correction

Accept [REDACTED] - 01/12/2023)

Director of wellness reviewed all medical charts for completion of support plans, all new admission will have a support plan within 30 days of admission by the Director of wellness. All nursing staff will be in serviced by the

227a - Support Plan 30 Days (continued)

director of wellness at the staff meeting on 12/29/2022 on initial support plan. The attached form will be utilized for all current and new residents by the director of wellness. See attached

Resident #1 had a support plan completed on [REDACTED] [REDACTED] 1/12/23

Licensee's Proposed Overall Completion Date: 12/29/2022

Implemented ([REDACTED] - 04/03/2023)