

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

February 18, 2023

[REDACTED]
HAP SENIOR CARE
5130 TUSCARAWAS ROAD
BEAVER, PA, 15009

RE: BEAVER MEADOWS
5130 TUSCARAWAS ROAD
BEAVER, PA, 15009
LICENSE/COC#: 41801

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/30/2022 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: *BEAVER MEADOWS* License #: *41801* License Expiration: *12/12/2023*
 Address: *5130 TUSCARAWAS ROAD, BEAVER, PA 15009*
 County: *BEAVER* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *HAP SENIOR CARE*
 Address: *5130 TUSCARAWAS ROAD, BEAVER, PA, 15009*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *11/12/2002* Issued By: *Dept. of Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *56* Waking Staff: *42*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *11/30/2022*

Inspection Dates and Department Representative

11/30/2022 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *83* Residents Served: *42*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *6*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *42*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *14* Have Physical Disability: *1*

Inspections / Reviews

11/30/2022 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/30/2022*

01/31/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *02/14/2023*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/07/2023*

Inspections / Reviews *(continued)*

02/06/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/14/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/13/2023

02/18/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/14/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

44d - Complaint Investigation

1. Requirements

2600.

44.d. The home shall ensure investigation and resolution of complaints. The home shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint.

Description of Violation

On [REDACTED]/22 during the [REDACTED] PM medication pass, staff person A, who held a practical nurse temporary permit, was the only nurse present in the home, and was not qualified to pass medication. However, staff person A presented resident #1's AM medications to resident #1 for PM administration. Resident #1 recognized the error, refused the medication, and reported the error to staff person A and staff person B. However, the home did not conduct an investigation or ensure resolution of this complaint.

On [REDACTED]/22 during the [REDACTED] AM medication pass, staff person A, who held a practical nurse temporary permit, left a white cup labeled [REDACTED], containing 1 [REDACTED] 24hr ER [REDACTED] and 1 [REDACTED] on resident #1's counter, who resides in bedroom [REDACTED]. However, these medications are prescribed for resident #2, who resides in bedroom [REDACTED]. Resident #1 recognized the error, refused the medication, and reported the error to staff person A and staff person C. However, the home did not conduct an investigation or ensure resolution of this complaint.

On [REDACTED] 22, staff person D spoke to resident #1 regarding these medication errors. However, the home did not conduct an investigation or ensure resolution of these complaints.

Plan of Correction

Accept ([REDACTED] - 02/06/2023)

- Nursing Care Supervisor went and talked to Resident #1 again regarding [REDACTED] complaint to inform [REDACTED] how the incident with Staff Person A was handled. This conversation took place December 1, 2022.
- Nursing Care Supervisor conducted a routine care conference with Resident #1 on December 6, 2022 with no further complaints of incident from Resident #1.
- The Administrator educated the Nursing Care Supervisor on 12/02/2022 on regulation 44.d. The home shall ensure investigation and resolution of complaints. The home shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint.
- Beginning 12/02/2022, the Administrator or designee will monitor complaints monthly to ensure compliance with 44.d. The home shall ensure investigation and resolution of complaints. The home shall designate the staff person responsible for receiving complaints and determining the outcome of the complaint.
- Beginning 12/02/2022, the Administrator is the person that is responsible for receiving complaints and determining the outcome of the complaint.
- Beginning 12/02/2022, the Administrator is also responsible to ensure investigation and resolution of complaints.

Licensee's Proposed Overall Completion Date: 02/04/2023

Implemented ([REDACTED] 02/18/2023)

182b - Prescription Medication

2. 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.

182b - Prescription Medication (*continued*)

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

On [REDACTED]/22 during the [REDACTED] PM medication pass, staff person A, who held a practical nurse temporary permit, was the only nurse present in the home, and was not qualified to pass medication. However, staff person A presented resident #1's AM medications to resident #1 for PM administration. Resident #1 recognized the error, refused the medication, and reported the error to staff person A and staff person B.

Plan of Correction

Accept [REDACTED] - 02/06/2023)

- Staff Person A has held LPN status in Ohio since September of 2017. During the survey, it was discovered that Staff Person A held a practical nurse temporary permit in Pennsylvania at the time of administering medication to Resident #1. At the time of inspection, Staff Person A did have a valid LPN in the state of Pennsylvania.

- The Administrator educated the Nursing Care Supervisor on 12/02/2022 on 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 s 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.

- Beginning 12/02/2022, the Administrator or designee will monitor staffing schedules monthly, including any temporary agency staff, to ensure compliance of 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 s 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.

Licensee's Proposed Overall Completion Date: 02/04/2023

Implemented [REDACTED] - 02/18/2023)

182c - Medication Administration

3. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
2. If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
3. Remove the medication from the original container.
4. Crush or split the medication as ordered by the prescriber.
5. Place the medication in a medication cup or other appropriate container, or in the resident's hand.
6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).
7. Complete documentation in accordance with § 2600.187 (relating to medication records).

Description of Violation

On [REDACTED]/22 during the [REDACTED] AM medication pass, staff person A, who held a practical nurse temporary permit, left a white cup labeled [REDACTED], containing 1 [REDACTED] and [REDACTED] on resident #1's counter, who resides in bedroom [REDACTED]. However, these medications are prescribed for resident #2, who resides in bedroom [REDACTED]. Resident #1 recognized the error, refused the medication, and reported the error to staff person A and staff person C.

Plan of Correction

Accept ([REDACTED] 02/06/2023)

- Med Techs and LPNs will be educated on regulation 182.C Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
2. If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
3. Remove the medication from the original container.
4. Crush or split the medication as ordered by the prescriber.
5. Place the medication in a medication cup or other appropriate container, or in the resident's hand.
6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).
7. Complete documentation in accordance with § 2600.187 (relating to medication records).

by Administrator and Nursing Care Supervisor. This education began on 12/05/22 and was completed by 01/05/23 - Beginning 12/02/2022, the Administrator or designee will monitor med techs and LPNs monthly during med passes to ensure compliance with 182.c. Medication administration includes the following activities, based on the needs of the resident:

1. Identify the correct resident.
2. If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
3. Remove the medication from the original container.
4. Crush or split the medication as ordered by the prescriber.
5. Place the medication in a medication cup or other appropriate container, or in the resident's hand.
6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).
7. Complete documentation in accordance with § 2600.187 (relating to medication records).

Three med techs and one LPN will be monitored each month and two med passes will be observed for each.

Licensee's Proposed Overall Completion Date: 02/04/2023

Implemented [REDACTED] 02/18/2023)