

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

July 5, 2023

[REDACTED]
PASSAVANT RETIREMENT AND HEALTH CENTER
[REDACTED]

RE: PASSAVANT RETIREMENT & HEALTH
CENTER - NEWHAVEN COURT
100 BURGESS DRIVE
ZELIENOPLE, PA, 16063
LICENSE/COC#: 42406

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/04/2023, 05/10/2023 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: PASSAVANT RETIREMENT & HEALTH CENTER
 NEWHAVEN COURT

Address: 100 BURGESS DRIVE, ZELIENOPE, PA 16063

County: BUTLER **Region:** WESTERN

License #: 42406 **License Expiration:** 09/19/2023

Administrator

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

Legal Entity

Name: PASSAVANT RETIREMENT AND HEALTH CENTER

Address: [REDACTED]

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

Certificate(s) of Occupancy

Type: 1 2 **Date:** 10/12/2014 **Issued By:** Zelienople

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 57 **Waking Staff:** 43

Inspection Information

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

Reason: Incident **Exit Conference Date:** 05/25/2023

Inspection Dates and Department Representative

05/04/2023 On Site [REDACTED]

05/10/2023 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 164 **Residents Served:** 57

Secured Dementia Care Unit

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

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 57

Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 2

Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

05/04/2023 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/15/2023

Inspections / Reviews *(continued)*

06/27/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/03/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 07/05/2023

07/05/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/03/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

143b - Residents Medical Information

1. Requirements

2600.

143.b. The following current emergency medical and health information shall be available at all times for each resident and shall accompany the resident when the resident needs emergency medical attention:

- 11. Personal information and related instructions regarding advance directives, do not resuscitate orders or organ donation, if applicable.

Description of Violation

On [redacted]/23 at approximately [redacted] a.m., resident #1's current emergency medical and health information including information and related instructions regarding advance directives, do not resuscitate orders or organ donation were not available in the home, and did not accompany the resident during a medical emergency that occurred in the home [redacted].

Plan of Correction

Accept [redacted] - 06/27/2023)

All current residents POLST's will be reviewed by the Administrator/designee to ensure that they are accurate and valid and that MyUnity system matches what the POLST says. This will be completed by 6/20/2023.

All resident's charts will be reviewed quarterly by the administrator/designee to ensure that if they have a POLST, it is accurate and valid and that the MyUnity system matches.

All staff will be educated on how to read a POLST, how to tell if it is valid, and what is the process to follow in an emergency when the resident's POLST is needed to be followed. This will be completed by 6/30/2023 by the administrator.

Licensee's Proposed Overall Completion Date: 06/30/2023

Implemented [redacted] - 07/05/2023)

225c - Additional Assessment

2. Requirements

2600.

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

- 1. Annually.
- 2. If the condition of the resident significantly changes prior to the annual assessment.
- 3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident #1's most recent assessment of care needs was completed on [redacted]/22.

Plan of Correction

Accept [redacted] - 06/27/2023)

Resident #1 [redacted] so we cannot update [redacted] RASP.

All current RASPS will be reviewed by the administrator and Personal care specialist to ensure they are completed in the accurate timeline and update if needed. This will be completed by 6/20/2023.

A spreadsheet will be made to ensure that all RASP's are completed in a timely manner by the Personal Care Specialist. Spreadsheet will be reviewed at the beginning of the month by the Personal Care specialist to ensure that the RASP's that need completed that month are done so.

All staff that participate in the RASP's will be trained on regulation 227d and on the importance of ensuring that the RASP is completed in the designated time frame. Training will be completed by 6/20/2023 by the administrator.

225c - Additional Assessment (continued)

Licensee's Proposed Overall Completion Date: 06/20/2023

Implemented ([REDACTED] - 07/05/2023)