

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

November 2, 2023

[REDACTED], ADMINISTRATOR
EC OPCO ALTOONA LLC

RE: CELEBRATION VILLA OF ALTOONA
170 RED FOX DRIVE
DUNCANSVILLE, PA, 16635
LICENSE/COC#: 33373

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/11/2023, 10/12/2023 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: CELEBRATION VILLA OF ALTOONA **License #:** 33373 **License Expiration:** 08/02/2024
Address: 170 RED FOX DRIVE, DUNCANVILLE, PA 16635
County: BLAIR **Region:** CENTRAL

Administrator

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

Legal Entity

Name: EC OPCO ALTOONA LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 10/01/1997 **Issued By:** Department of Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 52 **Waking Staff:** 39

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 10/12/2023

Inspection Dates and Department Representative

10/11/2023 - On-Site: [REDACTED]
10/12/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 66 **Residents Served:** 43

Secured Dementia Care Unit

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

Hospice

Current Residents: 12

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 0
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 9 **Have Physical Disability:** 0

Inspections / Reviews

10/11/2023 Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/27/2023

Inspections / Reviews (*continued*)

10/23/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/31/2023

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 10/31/2023

10/30/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/31/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/06/2023

11/02/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/31/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract for Resident #1, dated [REDACTED], was not signed by the resident.

Plan of Correction

Accept [REDACTED] 10/30/2023)

Administrator or Administrative Assistant will ensure that the contract is signed by the resident, payer, and designated person prior to or on the day of move-in. If a resident is unable to sign the contract, the Administrator or Administrative Assistant will ensure that, at the very least, the resident marks his/her agreement with the contract, and this will be noted on said contract. Administrative Assistant will fully audit the contract before filing it in the Resident's business file to ensure that all signatures have been obtained and all dates are complete.??Resident #1 has a dementia diagnosis and is unable to sign. The Executive Director wrote "unable to sign" on the signature lines and dated 10/13/23. The updated contract is attached. All facility contracts were audited on 10/19/23 and are in compliance

Licensee's Proposed Overall Completion Date: 10/27/2023

Implemented ([REDACTED] - 11/01/2023)

190b - Insulin Injections

2. Requirements

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

Description of Violation

On [REDACTED] at [REDACTED] PM Staff Member A, who does not have current diabetic training, performed blood sugar testing on Resident #2. On [REDACTED] at [REDACTED] PM Staff Member B, who does not have current diabetic training, performed blood sugar testing on Resident #2.

Plan of Correction

Accept ([REDACTED] - 10/30/2023)

Administrative Assistant and/or Director of Nursing and/or Assistant Director of Nursing will audit all Med Tech training files to ensure that Diabetes Education is currently up-to-date. Administrative Assistant and/or Director of Nursing and/or Assistant Director of Nursing will maintain a spreadsheet of all Med Tech training to ensure that Diabetes Education is completed annually. This spreadsheet was created on 10/23/23 and all Med Tech training files have been updated. If a Med Tech's Diabetic training is not within compliance, they will not be permitted to administer insulin injections until the updated Diabetic training has been completed. Staff members A and B were scheduled for and completed diabetic recertification on 10/17/23. Completion certificates are attached.

Licensee's Proposed Overall Completion Date: 10/27/2023

Implemented ([REDACTED] - 11/01/2023)

191 - Resident Right to Refuse

3. Requirements

2600.

191 - Resident Right to Refuse (*continued*)

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident #2 admitted [REDACTED], Resident #3 admitted [REDACTED] and Resident #4 admitted [REDACTED], have not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

Plan of Correction

Accept [REDACTED] - 10/30/2023)

The current contract utilized by the home states that the resident has the right to question or refuse a medication if the resident believes there may be a medication error. Each contract will be audited for completion prior to being filed in the resident chart (as stated in the POC above for violation 25.b) Residents #2, #3, and #4 have received an updated copy of the resident's rights by the Executive Director. They have all signed an acknowledgment form for receiving it on 10/17/23. A copy of the rights and the acknowledgment form are attached. All resident files will be audited by 10/27/23. Residents without an updated resident rights sheet will be provided with a new one.

Licensee's Proposed Overall Completion Date: 10/27/2023

Implemented [REDACTED] - 11/01/2023)

227d - Support Plan Medical/Dental

4. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #3's support plan, dated [REDACTED], does not document the need for an enabler bar. However, an enabler bar was observed attached to Resident #3's bed frame in room [REDACTED]

Plan of Correction

Accept [REDACTED] - 10/30/2023)

Director of Nursing will create a separate file for all residents with an order for an enabler bar (or any other additional medical order), to ensure that the community has the order on file and that the RASP documents the need for any special requirement. This file was created on 10/23/23 and will be kept in the Nursing Office. The Assistant Director of Nursing has updated Resident #3's support plan to include the enabler bar as per the Doctor's order. An updated copy of the support plan is attached. The support plan was updated on 10/17/23

Licensee's Proposed Overall Completion Date: 10/27/2023

Implemented [REDACTED] - 11/01/2023)