

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

April 10, 2024

[REDACTED]
MILLCREEK MANOR
[REDACTED]

RE: PARKSIDE SUITES/PARKSIDE AT
NORTH EAST
2 GIBSON STREET
NORTH EAST, PA, 16428
LICENSE/COC#: 44656

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/15/2023, 01/16/2024 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: PARKSIDE SUITES/PARKSIDE AT NORTH EAST License #: 44656 License Expiration: 11/03/2024
Address: 2 GIBSON STREET, NORTH EAST, PA 16428
County: ERIE Region: WESTERN

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: MILLCREEK MANOR
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

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

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 01/16/2024

Inspection Dates and Department Representative

12/15/2023 - On-Site: [Redacted]
01/16/2024 - Off-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 70 Residents Served: 39

Secured Dementia Care Unit

In Home: Yes Area: SCDU Capacity: 18 Residents Served: 15

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 39
Diagnosed with Mental Illness: 18 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 18 Have Physical Disability: 0

Inspections / Reviews

12/15/2023 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/02/2024

02/01/2024 - POC Submission

Submitted By: [Redacted] Date Submitted: 04/10/2024
Reviewer: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/08/2024

Inspections / Reviews *(continued)*

02/09/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/29/2024

04/10/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/10/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42x - Safeguard

2. Requirements

2600.

42.x. A resident has the right to a system to safeguard a resident's money and property.

Description of Violation

On [REDACTED] resident [REDACTED] informed the home [REDACTED] had gone missing from [REDACTED] resident room multiple times. However, the home failed to provide a system for safeguarding the resident's property.

On [REDACTED], resident [REDACTED] informed the home that multiple jewelry items had gone missing from [REDACTED] resident room. However, the home failed to provide a system for safeguarding the resident's property.

Plan of Correction

Accept [REDACTED] - 02/09/2024)

On [REDACTED], residents [REDACTED] and [REDACTED] were offer a lock box or a lock to be installed in [REDACTED] cabinet or drawer by the director. All current personal care residents will be offered a lock box or lock to be installed in [REDACTED] cabinet or drawer by the [REDACTED] by the director or designee. All new residents will be offered this at lease signing day by the director or designee starting [REDACTED].

Licensee's Proposed Overall Completion Date: 02/07/2024

Implemented [REDACTED] - 04/10/2024)

225c - Additional Assessment

3. Requirements

2600.

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

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident [REDACTED] most recent assessment completed on [REDACTED], assessed her personal care need of ambulation as independent. However, resident [REDACTED] has had multiple falls to include an unwitnessed fall on [REDACTED], an unwitnessed fall on [REDACTED], both resulting in hospital admissions.

Plan of Correction

Accept [REDACTED] 02/09/2024)

Resident [REDACTED] RASP has been updated on [REDACTED] by LPN
All residents will be reviewed for significant change upon return from hospital stay starting [REDACTED]. Starting [REDACTED] if significant change is identified, a new RASP will be completed within 5 days timeframe per regulation by LPN.

Licensee's Proposed Overall Completion Date: 02/07/2024

Implemented [REDACTED] 04/10/2024)

233c - Key-Locking Devices

4. Requirements

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

233c - Key-Locking Devices (continued)

Description of Violation

The directions for operating the home's locking mechanism are not conspicuously posted near the front entrance door to the Secure Dementia Care Unit (SDCU).

Plan of Correction**Accepted** [REDACTED] - 02/09/2024)

On [REDACTED], a recipe with the home's locking mechanism code in it was posted by all entrance doors to the secure dementia care unit by the director. In service done on [REDACTED] about the home locking mechanism code by the director. There will be quarterly audit done starting [REDACTED] to make sure we stay in compliance. This audit will be completed by [REDACTED]. This audit will be done by the administrator or designee.

Licensee's Proposed Overall Completion Date: 02/07/2024

Implemented [REDACTED] - 04/10/2024)