

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

February 13, 2024

[REDACTED], ADMINISTRATOR
MARIA HALL, INC.
190 MARIA HALL DRIVE, 3RD FLOOR
DANVILLE, PA, 17821

RE: MARIA HALL
190 MARIA HALL DR., 3RD FLOOR
DANVILLE, PA, 17821
LICENSE/COC#: 21521

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/20/2023 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: MARIA HALL License #: 21521 License Expiration: 11/08/2024
 Address: 190 MARIA HALL DR., 3RD FLOOR, DANVILLE, PA 17821
 County: MONTOUR Region: NORTHEAST

Administrator

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

Legal Entity

Name: MARIA HALL, INC.
 Address: 190 MARIA HALL DRIVE, 3RD FLOOR, DANVILLE, PA, 17821
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 03/26/1998 Issued By: DLI
 Type: I-2 Date: 05/24/2018 Issued By: DLI

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 15 Waking Staff: 11

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 12/20/2023

Inspection Dates and Department Representative

12/20/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 36 Residents Served: 15
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 14 Are 60 Years of Age or Older: 15
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

12/20/2023 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/20/2024

Inspections / Reviews *(continued)*

02/06/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/09/2024

02/13/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

63a - First Aid/CPR Training

1. Requirements

2600.

63.a. At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.

Description of Violation

On 12/1/2023 during the 10pm to 8am shift there was not a First Aid and CPR trained staff on duty. The training certificate for staff B only states CPR AED.

Plan of Correction

Accept (█) - 02/06/2024)

On January 15, 2024, 15 Nursing and Ancillary staff completed a 5 hour Adult and Pediatric First Aid/CPR/AED training. Another class is being scheduled to accommodate the rest of the staff. When the schedule is made, the Director of Resident Care will assure that a certified staff member is on duty for every shift. The Administrator will verify that scheduling is appropriate.

Licensee's Proposed Overall Completion Date: 01/16/2024

Implemented (█) - 02/13/2024)

65f - Training Topics

2. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.
2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.

Description of Violation

Staff A did not complete the mandatory training topics: Medication Self Administration or DME / RASP training in training year 2022

Plan of Correction

Accept (█) - 02/06/2024)

Although Staff A did not complete the training on meeting resident needs as described in the preadmission screening and Rasp in 2022, she did complete it in 2023. The training plan for all staff for 2024 includes all required trainings. The DRC will verify that training is completed.

Licensee's Proposed Overall Completion Date: 01/19/2024

Implemented (█) - 02/13/2024)

141a - Medical Evaluation

3. 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's Document of Medical Evaluation (DME) does not include the date the evaluation occurred. There is no way to verify the evaluation was completed timely.

Repeat 9/29/2022

141a - Medical Evaluation (continued)

Plan of Correction

Accept (█ - 02/06/2024)

Though there was a date at the bottom of the DME, it was not filled in at the top. The DRC did complete that. in December 2023 Henceforth when a DME is returned by the physician, the DRC will examine it to make sure all information ha been completed.

Licensee's Proposed Overall Completion Date: 01/16/2024

Implemented (RY - 02/13/2024)

183d - Prescription Current

4. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

Resident # 2 had a Pro re Nata (PRN) medication of █ in the Medication Cart. Resident #2 does not have a current order for this medication.

Plan of Correction

Accept (█ - 02/06/2024)

When the █ was discontinued, it was not removed from the med cart. That was done as soon as staff were made aware of the error on December 20. Henceforth when a medication is discontinued,, the DRC will check the med cart to make sure it has been removed.

The Administrator will monitor for ongoing compliance. █

Proposed Overall Completion Date: 01/16/2024

Licensee's Proposed Overall Completion Date: 01/16/2024

Implemented (█ - 02/13/2024)