

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

February 28, 2024

[REDACTED], OWNER

RE: STAR HILL REST HOME
935 STAR HILL ROAD
MONROE TOWNSHIP, PA, 18618
LICENSE/COC#: 23037

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/10/2024 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: STAR HILL REST HOME License #: 23037 License Expiration: 11/23/2024
 Address: 935 STAR HILL ROAD, MONROE TOWNSHIP, PA 18618
 County: WYOMING Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED]

Legal Entity

Name: BEATRICE CLARK
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 12/22/1993 Issued By: L&I

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: 01/10/2024

Inspection Dates and Department Representative

01/10/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 23 Residents Served: 13
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 1
 Number of Residents Who:
 Receive Supplemental Security Income: 6 Are 60 Years of Age or Older: 13
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 2 Have Physical Disability: 0

Inspections / Reviews

01/10/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/03/2024

02/05/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 02/28/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/09/2024

Inspections / Reviews *(continued)*

02/12/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/28/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/17/2024

02/28/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/28/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

64c - Annual Training

1. Requirements

2600.

64.c. An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.

Description of Violation

Administrator A completed only 21 hours of annual administrator training for the 2023 training year.

Plan of Correction

Accept ([redacted] - 02/05/2024)

In the future [redacted] the administrator will have completed all the training within a timely manner. I will also in this year complete and extra 3 hours training to compensate the training missed for the previous year. Furthermore, I will also do a quarterly check to make sure my training is completed on time

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

Implemented [redacted] - 02/28/2024)

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.

Description of Violation

Staff persons B and C did not have training in medication self administration for the 2023 training year.

Plan of Correction

Accept ([redacted] - 02/12/2024)

In the future I the administrator [redacted] will make sure proper training is done at time of hire and during yearly training. I [redacted] the administrator will also do a monthly check on all staffing to make sure that the training is completed. All staff had training on 1/30/24 for medication self administration conducted by myself [redacted] (administrator) including staff member B & C listed above.

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented [redacted] - 02/28/2024)

91 - Telephone Numbers

3. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

The phone numbers attached to the cordless phone located in the kitchen/dining area did not have the current

91 Telephone Numbers (continued)

Personal Care Home complaint hotline posted on or near it.

Plan of Correction

Accept () - 02/12/2024)

In the future () as the administrator will make sure all the phone numbers are correct and up to date. All phone numbers were corrected by myself () and replaced at the time of inspection on 1/10/24. I () () k the administrator will continue to monitor all the phone number monthly to make sure they are accurate.

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented () - 02/28/2024)

103e - Left Overs

4. Requirements

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

The following unlabeled foods were found in the lower level refrigerator: a tray of brownies and a block of cream cheese.

Plan of Correction

Accept () - 02/12/2024)

The day of the inspection 1/10/24 the staff on duty had labeled and dated the contents in the refrigerator. I () () the administrator have added a daily calendar for the refrigerator and freezer to be checked by the staff on duty daily. I () will monitor the staff & logs weekly to make sure compliance is maintained. Also, I () () the administrator had training will all the staff on the importance of proper food storage and preparation on 1/30/24.

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented () - 02/28/2024)

103f - Refrigerator/Freezer Temps

5. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

The internal temperature of the refrigerator located in the 2nd apartment on the lower level was 45° F.

Plan of Correction

Accept () - 02/12/2024)

At the time of the inspection on 1/10/24 the refrigerator was turned down to keep the temperature below 40 degrees. I () the administrator have also created a log to have the temperatures checked daily by the staff on duty. I () will monitor the staff & logs weekly to make sure compliance is maintained. Finally I () () the administrator had staff training on the importance of refrigeration and freezer temperatures on 1/30/24.

Licensee's Proposed Overall Completion Date: 02/08/2024

103f - Refrigerator/Freezer Temps (continued)

Implemented () - 02/28/2024)

103g - Storing Food

6. Requirements

2600.
103.g. Food shall be stored in closed or sealed containers.

Description of Violation

There were two slices of cake stored in the lower level refrigerator that were placed on plates but not covered by any type of plastic wrap.

Plan of Correction

Accept () - 02/12/2024)

The day of inspection 1/10/24 the staff on duty properly covered the contents and labeled/dated it. I () will monitor the staff & logs weekly to make sure compliance is maintained. Again I () the administrator have re-trained the staff on safe food preparation and storage the prevent future occurrences on 1/30/24.

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented () 02/28/2024)

181c - Self-administration Assessment

7. Requirements

2600.
181.c. The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

Description of Violation

Resident #1 has an order for () to be administered twice daily. The resident currently stores this medication in their room and self administers the insulin. Resident #1's Documentation of Medical Evaluation (DME) form dated () indicates the resident can not self administer this medication.

Plan of Correction

Accept () - 02/12/2024)

In the future I () the administrator will make sure all forms are properly filled out to meet each residents needs. () the administrator will do monthly checks on all residents files to make sure everything is up to date and accurate. The resident was seen by () physician on () at which time the DME was updated to state that the patient is able to self administer () insulin. On () all patients files were monitored to make sure up to date and accurate.

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented () - 02/28/2024)

227e - Self Administer Medication

8. Requirements

2600.

227e - Self Administer Medication (continued)

227.e. The resident's support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.

Description of Violation

Resident #1 currently self administers insulin twice daily and stores the medication in their room. Resident #1's current support plan dated [REDACTED] does not indicate that the resident self administers this medication. The information on page 5 in the medication assessment section indicates that staff stores and administers all the resident's medications.

Plan of Correction

Accept ([REDACTED] - 02/12/2024)

In the future I the administrator [REDACTED] will make sure all documentation is up to date and accurate. I [REDACTED] the administrator will monitor all residents files monthly to make sure proper changes are updated. The resident was evaluated by her physician on 2/1/24 and at that time her support plans was updated to indicate patient is able to self administer her insulin. On 2/1/24 all residents files were checked to make sure up to date and accurate to support each patients needs

Licensee's Proposed Overall Completion Date: 02/08/2024

Implemented ([REDACTED] 02/28/2024)