

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

February 21, 2024

[REDACTED], ADMINISTRATOR  
SENIOR CHOICE INC  
495 WEST PATRIOT STREET  
SOMERSET, PA, 15501

RE: THE PATRIOT A CHOICE  
COMMUNITY  
495 WEST PATRIOT STREET  
SOMERSET, PA, 15501  
LICENSE/COC#: 32136

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]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: THE PATRIOT A CHOICE COMMUNITY License #: 32136 License Expiration: 11/09/2024  
 Address: 495 WEST PATRIOT STREET, SOMERSET, PA 15501  
 County: SOMERSET Region: CENTRAL

**Administrator**

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

**Legal Entity**

Name: SENIOR CHOICE INC  
 Address: 495 WEST PATRIOT STREET, SOMERSET, PA, 15501  
 Phone: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-1 Date: 09/11/1990 Issued By: DOH

**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: 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: 76 Residents Served: 43  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 41  
 Number of Residents Who:  
 Receive Supplemental Security Income: 5 Are 60 Years of Age or Older: 41  
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 9 Have Physical Disability: 0

**Inspections / Reviews**

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

01/31/2024 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 02/16/2024  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/07/2024

Inspections / Reviews *(continued)*

02/09/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/16/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/16/2024

02/21/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/16/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 25a - Written Contract and Review

## 1. Requirements

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.

## Description of Violation

Resident #4, admitted [REDACTED], lacked a resident-home contract on file.

## Plan of Correction

Accept [REDACTED] - 01/31/2024)

PCHA met with resident #4 and POA on 1/17/2024 to review and complete the resident contract. A new admission checklist was implemented on 1/22/2024 and will be completed by the PCHA upon admission of each new resident. The PCHA will complete the resident contract with the resident and/or POA prior to or on the day of admission. All current resident files will be audited by the PCHA for resident contract completion. Upon completion of a resident contract, the Nursing Home Administrator will audit the file for completion and sign off on the new admit checklist for 2 months. The results will be shared with the Quality Assurance Performance Improvement Committee.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented [REDACTED] - 02/20/2024)

## 25b - Contract Signatures

## 2. 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 contracts, dated [REDACTED] for resident #1 and [REDACTED] for resident #2 lacked signatures by the residents.

## Plan of Correction

Accept [REDACTED] - 02/09/2024)

The PCHA met with residents #1 and #2 to review contract and obtain resident signatures on [REDACTED]. The PCHA will audit all current resident files to ensure all contracts are signed by the resident, as well as the POA if applicable. Upon completion of a resident contract, the lead med tech will double check the file for completion and sign off on the new admission checklist for 2 months.

Licensee's Proposed Overall Completion Date: 02/05/2024

Implemented [REDACTED] - 02/20/2024)

## 41e - Signed Statement

## 3. Requirements

2600.

41.e. A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

## Description of Violation

Resident 4's record did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaint procedures.

41e Signed Statement (continued)

Plan of Correction

Accept (█ - 01/31/2024)

PCHA met with resident #4 and POA on 1/17/2024 to review and complete the resident contract as well as the resident rights and complaint procedure. A new admission checklist was implemented on 1/22/2024 and will be completed by the PCHA upon admission of each new resident. Prior to or on the day of admission the PCHA will review the resident rights and complaint procedure with the resident and POA if applicable. All current resident files will be audited by the PCHA for resident contract completion and resident notice of resident rights and the complaint procedure. Upon completion of a resident contract, the lead med tech will double check the file for completion and sign off on the new admission checklist for 2 months.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█ - 02/20/2024)

65d - Initial Direct Care Training

4. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

- 2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

Description of Violation

Direct care staff person A, hired on █ began providing unsupervised ADL services on █. However, the staff person lacked verification of completing the Department approved direct care training course.

Plan of Correction

Accept (█ - 01/31/2024)

Direct care staff person A completed the direct care training course on 1/24/2024.

The PCHA will audit all staff files to ensure proper credentials of all personal care staff. A new hire checklist was implemented in October of 2022. The PCHA will continue to collect all appropriate new hire documentation prior to the staff members' first day and complete the new hire checklist.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█ - 02/20/2024)

105g - Lint Removal and Duct Cleaning

5. Requirements

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

On 1/10/24, there was approximately 1/2 inch accumulation of lint in the lint trap of the homes 3 commercial dryers located in the 1st floor laundry room. There were no clothes in the dryer at the time.

Plan of Correction

Accept (█ - 01/31/2024)

The lint trap was immediately cleaned. The environmental services (EVS) manager provided re education to all housekeeping and laundry staff on 1/12/24, concerning proper lint trap cleaning. The environmental services manager implemented a lint trap cleaning sign off sheet that will be completed by laundry personnel after each

**105g - Lint Removal and Duct Cleaning (continued)**

load of laundry is finished drying. The EVS manager will monitor the sign off sheet for completion daily. PCHA will conduct random lint trap audits daily for 1 week, then weekly for 4 weeks, then monthly for 3 months.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█) - 02/20/2024)

**185a - Implement Storage Procedures****6. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

On █, at █ the glucometer for resident #3 recorded a blood sugar of █ but documented a measurement of █ on the Medication Administration Record (MAR). On █ resident #3's glucometer recorded a blood sugar measurement of █ but lacked documentation on the MAR of this measurement. On █ the blood sugar measurement prescribed for resident #2 at █ recorded a measurement of █ however resident #2's glucometer has no record of this measurement at this time and date.

**Plan of Correction**

Accept (█) - 02/09/2024)

The PCHA reviewed the orders for residents #2 and #3, on █ to verify that the glucometer errors did not result in a medication error. It was confirmed that there were no medication errors that resulted from the transcription errors. The physician was notified of the errors on █. The PCHA provided re-education to all med techs and LPNs, on █, concerning the glucometer policy and proper documentation of blood glucose levels. The PCHA will audit glucometers daily for 1 week, and then weekly thereafter.

Licensee's Proposed Overall Completion Date: 02/05/2024

Implemented (█) - 02/20/2024)

**187b - Date/Time of Medication Admin.****7. Requirements**

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

**Description of Violation**

On █ the following prescribed medications for resident #3 were not documented on the MAR as being administered; █.

**Plan of Correction**

Accept (█) - 02/09/2024)

On 1/10/2024, the PCHA reviewed resident's orders and medication cards on to confirm that all doses of the medications had been given. The PCHA also met with the resident, who stated that she had not missed any doses of any of █ medications. The PCHA also spoke with the staff member responsible for administering medications on 12/30/2023, █ stated that █ administered all ordered medications to resident #3, but █ forgot to sign them off in the MAR. The PCHA provided re-education to all med techs and LPNs, on 2/1/2024, concerning proper and timely documentation of medication administration. The PCHA will audit the medication variance report daily for 2

**187b - Date/Time of Medication Admin. (continued)**

weeks, and weekly thereafter.

Licensee's Proposed Overall Completion Date: 02/05/2024

Implemented (█) - 02/20/2024)

**187d - Follow Prescriber's Orders****8. Requirements**

2600.

187.d. The home shall follow the directions of the prescriber.

**Description of Violation**

On █ between █, resident #2 did not receive a blood sugar measurement as prescribed.

**Plan of Correction**

Accept (█) - 02/09/2024)

The PCHA reviewed the orders for residents #2, █ to verify that the glucometer error did not result in a medication error. It was confirmed that there were no medication errors that resulted from the omitted blood glucose check. The physician was notified of the omitted blood glucose check on 2/1/2024. The PCHA provided re-education to all med techs and LPNs, on 2/1/2024, concerning the glucometer policy and proper documentation of blood glucose levels. The PCHA will audit glucometers daily for 1 week, and then weekly thereafter.

Licensee's Proposed Overall Completion Date: 02/05/2024

Implemented (█) - 02/20/2024)

**191 - Resident Right to Refuse****9. Requirements**

2600.

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 #4, admitted █, has 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 (█) - 01/31/2024)

PCHA met with resident #4 and POA on 1/17/2024 to review and complete the resident contract and review the resident rights. A new admission checklist was implemented on 1/22/2024 and will be completed by the PCHA upon admission of each new resident. The PCHA will complete the resident contract and review all resident rights with the resident and POA prior to or on the day of admission. All current resident files will be audited by the PCHA for resident contract completion. Upon completion of a resident contract, the lead med tech will double check the file for completion and sign off on the new admission checklist for 2 months.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█) - 02/20/2024)