

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

February 7, 2024

[REDACTED]
HIGHLAND PARK SENIOR LIVING LLC
[REDACTED]

RE: HIGHLAND PARK SENIOR LIVING
874 SCHECHTER DRIVE
WILKES-BARRE TOWNSHI, PA, 18702
LICENSE/COC#: 22630

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/23/2024 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: *HIGHLAND PARK SENIOR LIVING* License #: *22630* License Expiration: *10/05/2024*
 Address: *874 SCHECHTER DRIVE, WILKES-BARRE TOWNSHI, PA 18702*
 County: *LUZERNE* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *HIGHLAND PARK SENIOR LIVING LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *03/01/2018* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *91* Waking Staff: *68*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident, Interim* Exit Conference Date: *01/23/2024*

Inspection Dates and Department Representative

01/23/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *160* Residents Served: *68*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Bridges* Capacity: *24* Residents Served: *23*

Hospice
 Current Residents: *4*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *68*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *23* Have Physical Disability: *0*

Inspections / Reviews

01/23/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/10/2024*

02/07/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *02/07/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews (*continued*)

02/07/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/07/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On [redacted] resident [redacted] was combative with care during showering. As a result, staff person A began verbally abusing resident [redacted] by yelling angrily at them. The incident was witnessed by staff persons B and C.

Plan of Correction

Accept [redacted] - 02/07/2024)

Please see attached signature sheets and some of the information for the training provided. [redacted], Administrator has trained every staff member on Resident Rights, treating residents with dignity and respect and positive interventions to modify or eliminate behaviors without the utilization of prohibited [redacted], and different types of [redacted] on the following dates [redacted]. During the yearly resident right inservices [redacted], DOW will expand [redacted] trainings to include not only resident rights but treating residents with dignity and respect and positive interventions to modify and eliminate behaviors without the utilization of prohibited restraints and different types of restraints to increase subject knowledge of each and every staff.

Licensee's Proposed Overall Completion Date: 02/06/2024

Implemented [redacted] - 02/07/2024)

131f - Fire Extinguisher Inspection

2. Requirements

2600.

131.f. Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.

Description of Violation

The fire extinguisher located in Bridges East section did not have an inspection tag attached to it.

Plan of Correction

Accept [redacted] - 02/07/2024)

Please see attached picture of fire extinguisher sticker (same as hanging tag) and audit form. [redacted], Administrator has created a weekly and monthly fire extinguisher audit form that has begun [redacted]. Fire extinguishers will be checked weekly by [redacted], Administrator to inspect for intact hanging tags and to audit documentation on tags of monthly fire extinguisher inspections to ensure completion. Monthly fire extinguisher inspections will be completed by [redacted], [redacted]/maintenance dept. Any issues or concerns will be brought to [redacted], Administrators attention immediately. Cintas has also added a sticker tag on all fire extinguishers today during yearly inspection of fire extinguishers in addition to the hanging tag that will also be documented on at time of monthly fire extinguishers inspection.

Licensee's Proposed Overall Completion Date: 02/06/2024

Implemented [redacted] - 02/07/2024)

187d - Follow Prescriber's Orders

3. Requirements

187d - Follow Prescriber's Orders (continued)

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [redacted] has an order for [redacted] readings before meals and at bedtime with insulin to be administered on a sliding scale. On [redacted] at [redacted] resident [redacted] was [redacted] but was recorded as [redacted] and no [redacted] were administered. A [redacted] reading of [redacted] required [redacted] of [redacted] according to the resident's prescribed sliding scale. On [redacted] at [redacted] there was a [redacted] reading of [redacted] recorded that was not found in the resident's [redacted]. Also, on [redacted] the resident's [redacted] was not tested before the resident ate lunch. The resident's [redacted] was [redacted] at [redacted].

Plan of Correction

Accept [redacted] - 02/07/2024)

Please see attached [redacted] audit form. [redacted], administrator has created and implemented a daily [redacted] audit form that was started on [redacted]. Med techs will complete daily on each shift after each [redacted] along with documentation of [redacted] readings and insulin administered in MARs on all 3 carts are audited to ensure that we are following the directions of the prescriber by administering the correct dose of [redacted]. [redacted], DOW will oversee med techs to ensure audits are being done on a daily basis. [redacted], DOW will also sign off weekly on audit form after auditing [redacted] against documentation in MARs to ensure proper documentation and administration of [redacted] to ensure prescriber directions/orders are being followed.

Licensee's Proposed Overall Completion Date: 02/06/2024

Implemented [redacted] - 02/07/2024)

202 - Prohibitions

4. Requirements

2600.
202. The following procedures are prohibited:

Description of Violation

The incident was witnessed by staff persons B and C. Also, a care note in the resident's record indicates that staff person B restrained resident [redacted] arms during the incident to prevent the resident from continuing to hit staff.

Plan of Correction

Accept [redacted] 02/07/2024)

Please see attached training signature sheets and some of information utilized in trainings. [redacted], Administrator has trained all staff on Resident Rights, treating residents with dignity and respect and how to modify or eliminate a behavior with positive interventions in place of using prohibited restraints on [redacted]. Training included the different forms of restraints, different positive interventions to defuse situations without using prohibited restraints. [redacted] DOW will include into his yearly inservice for Resident Rights training to include different types of prohibited restraints and what positive interventions can be used in place. [redacted], Administrator will research additional information to assist James with the expansion of information for these trainings to make the trainings as informative as possible to increase the staff knowledge to avoid any further situations as this.

Licensee's Proposed Overall Completion Date: 02/06/2024

202 - Prohibitions (*continued*)

Implemented [REDACTED] - 02/07/2024)