

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

July 25, 2024

[REDACTED]
MILLCREEK MANOR
[REDACTED]

RE: REGENCY SUITES/REGENCY AT
SOUTH SHORE
322 WASHINGTON PLACE
ERIE, PA, 16505
LICENSE/COC#: 44657

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/07/2024 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: *REGENCY SUITES/REGENCY AT SOUTH SHORE* License #: *44657* License Expiration: *11/03/2024*
 Address: *322 WASHINGTON PLACE, ERIE, PA 16505*
 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

Type: *C-2 LP* Date: *04/08/1993* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *72* Waking Staff: *54*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *05/07/2024*

Inspection Dates and Department Representative

05/07/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *70* Residents Served: *48*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *48*
 Diagnosed with Mental Illness: *13* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *24* Have Physical Disability: *0*

Inspections / Reviews

05/07/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/01/2024*

06/14/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *07/25/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/20/2024*

Inspections / Reviews (*continued*)

06/26/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/25/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 07/26/2024

07/25/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/25/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

183d - Prescription Current

1. 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 [REDACTED] is prescribed [REDACTED] and [REDACTED] one puff by mouth twice a day for COPD discard 30 days after removing from foil pouch. The ordered medication was present in the medication cart removed from its foil pouch with an open date indicated on its container of [REDACTED]

Plan of Correction

Accept [REDACTED] - 06/12/2024)

- 1. Expired inhaler was removed from cart by PCHA, LPN on 5/7/24.
- 2. Education for staff on expired medications to be completed on 5/24/24 by DON/designee.
- 3. Whole house cart audit for expired medications completed on 5/10/24 by DON and LPN and all expired medications were removed, appropriately discarded
- 4. All medication carts will be audited weekly x 4 weeks; twice monthly for 2 months and monthly thereafter by DON or designee through 11/30/24

Licensee's Proposed Overall Completion Date: 11/30/2024

Implemented [REDACTED] - 07/25/2024)

184a - Resident's Meds Labeled

2. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] oral tablet give one tablet by mouth two times a day for a vitamin supplement. However, the medication's label indicates take one softgel daily preferably with a meal.

Resident [REDACTED] is prescribed preserivision [REDACTED] capsule will give one capsule by mouth two times a day for macular degeneration. However, the medication's label states take one tablet daily with food.

Resident [REDACTED] is prescribed [REDACTED] oral tablet give one tablet by mouth every six hours as needed for pain. However, the medication's label indicates take two caplets every eight hours with water.

Plan of Correction

Accept [REDACTED] - 06/26/2024)

- 1. Whole house audit completed on 5/10/24 by DON and all OTC medications labeled on 5/10/24 by DON.
- 2. Education for staff on OTC labels to be completed on 5/24/24 by DON/designee.
- 3. All medication carts will be audited weekly x 4 weeks; twice monthly for 2 months and monthly thereafter by DON or designee through 11/30/24
- 4. All OTC medication to go to DON or designee to get labeled before being put in the medication carts effective 5/10/24.

Licensee's Proposed Overall Completion Date: 06/26/2024

Implemented [REDACTED] - 07/25/2024)

187a - Medication Record

3. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident [redacted] April 2024, medication administration record indicates the ordered medication of [redacted] give one tablet by mouth one time a day was administered on 4/8/24, and 4/15/24. However, the medication was not administered. The medication was not in the home.

Resident [redacted] April 2024, medication administration record indicates the ordered medication of [redacted] tablet give one tablet by mouth two times a day was administered on 5/1/24, 5/2/24, and 5/3/24, at 8:00 p.m. However, the medication was not administered. The medication was not in the home.

Resident [redacted] April 2024, medication administration record indicates the prescribed medication, [redacted] tablet extended release 24-hour 25mg give 2 tablet by mouth one time a day was administered on multiple dates to include 4/8/24, 4/10/24, and 4/15/24. However, the medication was not administered. The medication was not in the home.

Plan of Correction

Accept [redacted] - 06/26/2024)

1. Education completed by DON/designee at staff meeting on 5/24/24 on falsification of documentation.
2. Whole house cart audit completed on 5/10/24 by DON for all missing medications and calls made to pharmacies, physician offices for refills.
3. Daily missing medication reports to be pulled by PCHA/designee and communicated to DON/designee to ensure medications are in the facility to be completed through 11/30/24

Licensee's Proposed Overall Completion Date: 06/26/2024

Implemented [redacted] - 07/25/2024)

187d - Follow Prescriber's Orders

4. Requirements

2600.

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

Description of Violation

Resident [redacted] is prescribed [redacted] and [redacted] one puff by mouth twice a day for COPD discord 30 days after removing from foil pouch. The ordered medication was present in the medication cart with an open date indicated on its container of [redacted], with three doses of medication left indicating 57 total doses of medication were administered between [redacted] and [redacted]. However, the prescriber's ordered dosage of medication from [redacted] through [redacted] would have totaled an aggregate amount of approximately 134 administered puffs of medication.

Resident [redacted] is prescribed [redacted] give one tablet by mouth one time a day. However, the resident was not administered this medication on multiple dates to include [redacted], through [redacted]. The medication was not in the home.

Resident [redacted] is prescribed [redacted] give one capsule by mouth two times a day for pain. However, the medication was not administered on [redacted] at 8:00 p.m., and [redacted] 8:00 a.m.

187d - Follow Prescriber's Orders (continued)

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth two times a day. However, the resident was not administered this medication on multiple dates to include [REDACTED], through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] and still one drop in both eyes at bedtime for unspecified glaucoma. However, the resident was not administered this medication from [REDACTED], through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] your oral tablet extended release 24-hour 25mg give 2 tablets by mouth one time a day. However, the resident was not administered this medication on multiple dates to include [REDACTED], through [REDACTED], and [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] and still one ribbon in both eyes at bedtime. However, the resident was not administered this medication from [REDACTED] through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] and still one drop in both eyes four times a day for dry eyes. However, this medication was not administered on multiple dates to include [REDACTED] through for [REDACTED], and [REDACTED]. The medication was not available in the home.

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth two times a day for vitamin deficiency. However, the medication was not administered on multiple dates to include [REDACTED], and [REDACTED], at 8:00 a.m. The medication was not in the home.

Resident [REDACTED] was prescribed preserivation [REDACTED] capsules give one capsule by mouth two times a day four vitamin deficiency. However, the resident was not administered this medication on [REDACTED] and at 8:00 a.m., and 8:00 p.m., and [REDACTED] at 8:00 am. The medication was not in the home.

Resident [REDACTED] prescribed [REDACTED] give one tablet by mouth one time a day. However, the resident was not administered this medication from [REDACTED] through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth two times a day give one tab by mouth twice a day. However, the resident was not administered this medication from [REDACTED] through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth at bedtime. However, the resident was not administered this medication from [REDACTED], through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] give one capsule by mouth one time a day. However, the resident was not administered this medication from [REDACTED] and [REDACTED].

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth one time a day. However, the resident was not administered this medication from [REDACTED] through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] give one tablet by mouth one time a day. However,

187d - Follow Prescriber's Orders (continued)

the resident was not administered this medication from [REDACTED], through [REDACTED]. The medication was not in the home.

Resident [REDACTED] is prescribed [REDACTED] give one capsule by mouth in the afternoon. However, the resident was not administered the medication on multiple dates to include [REDACTED] and [REDACTED]. The medication was not in the home.

Residence [REDACTED] is prescribed [REDACTED] give 2 tablets by mouth four times a day. However, the resident was not administered this medication on multiple dates to include [REDACTED]. The medication was not in the home.

Plan of Correction**Accept** [REDACTED] 06/26/2024)

1. Education completed by DON/designee at staff meeting on 5/24/24 on falsification of documentation.
2. Whole house cart audit completed on 5/10/24 by DON for all missing medications and calls made to pharmacies, physician offices for refills.
3. Daily missing medication reports to be pulled by PCHA/designee and communicated to DON/designee to ensure medications are in the facility to be completed through 11/30/24

Licensee's Proposed Overall Completion Date: 06/26/2024**Implemented** [REDACTED] - 07/25/2024)