

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

November 21, 2024

[REDACTED], DIRECTOR OF OPERATIONS
LECOM AT ELMWOOD GARDENS LLC
[REDACTED]

RE: PARKSIDE AT ELMWOOD
2628 ELMWOOD AVENUE
ERIE, PA, 16508
LICENSE/COC#: 45593

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/02/2024 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: *PARKSIDE AT ELMWOOD* License #: *45593* License Expiration: *06/04/2025*
 Address: *2628 ELMWOOD AVENUE, ERIE, PA 16508*
 County: *ERIE* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED]

Legal Entity

Name: *LECOM AT ELMWOOD GARDENS LLC*
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *04/03/2067* Issued By: *Dept L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *11* Waking Staff: *8*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *10/02/2024*

Inspection Dates and Department Representative

10/02/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *35* Residents Served: *10*

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

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *10*
 Diagnosed with Mental Illness: *5* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

10/02/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/03/2024*

11/13/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *11/20/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/20/2024*

Inspections / Reviews *(continued)*

11/20/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/20/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/13/2024

11/21/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/20/2024

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 #1's resident-home contract, dated [redacted] is between the resident and Presbyterian Senior Care/Elmwood Gardens. The home had a change of ownership on [redacted]; however, a new resident-home contract or resident-home contract addendum was not completed for the resident.

Resident #2's resident-home contract, dated [redacted] is between the resident and Presbyterian Senior Care/Elmwood Gardens. The home had a change of ownership on [redacted]; however, a new resident-home contract or resident-home contract addendum was not completed for the resident.

Resident #3's resident-home contract, dated [redacted], is between the resident and Elmwood Gardens. The home had a change of ownership on [redacted] however, a new resident-home contract or resident-home contract addendum was not completed for the resident.

Plan of Correction

Accept ([redacted] - 11/20/2024)

Regulations 2600 25 a. was violated by not having an updated written resident-home contract between the resident and the home with 24 hours of change of ownership. Administrator corrected and reviewed the agreement with resident # 1 on [redacted]. Administrator corrected and reviewed the agreement with resident # 2 on [redacted]. Administrator corrected and reviewed the agreement with resident #3 on [redacted]. Administrator or designee will review admission agreements within 14 days of each admission to ensure compliance with regulations. This review will be ongoing. Administrator initiated agreement audits on [redacted] and ended on [redacted] to ensure they are updated with current owner.

Licensee's Proposed Overall Completion Date: 11/13/2024

Implemented ([redacted] - 11/21/2024)

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:

1. The resident’s name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

Resident #2 is prescribed [redacted] capsule, give 1 capsule by mouth every 12 hours as needed for [redacted]; however, the pharmacy label indicates give daily.

184a - Resident's Meds Labeled (continued)

Plan of Correction

Accept (█) - 11/20/2024)

Regulation 2600. 184 a. was violated by the a prescription bottle not having the proper label. Administrator corrected the label at time of findings. Staff was given education by administrator starting on 10/6/2024 on proper pharmacy labels and regulations, complete on 10/11/2024. A medication label audit was initiated on 10/3/2024 by administrator , followed by a weekly audit on 10/10/2024 and 10/24/2024 performed by med tech on medication cart. A monthly audit will start on 11/1/2024 and continue for 3 months, then every other month on going. The audits will be performed by staff member on medication cart.

Licensee's Proposed Overall Completion Date: 11/13/2024

Implemented (█) - 11/21/2024)

187b - Date/Time of Medication Admin.

3. 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

Resident #4 is prescribed █, give 1 tablet by mouth at bedtime. However, █ September 2024 medication administration record does not include the initials of the staff person who administered this medication on █

Plan of Correction

Accept (█) - 11/20/2024)

Regulation 2600 187 b. was violated by no documentation at the time of medication administration. Missed medication administration education, given by administrator, started on 10-6-2024 and ended on 10/11/2024 on how to run a missed medication report at the end of each shift. Administrator gave the rights of medication administration education to staff starting on 10/25/2024, completed on 10/28/2024. This education will be given to new staff within first 10 days of being in the building. A weekly audit of missed medication was started on 10/07/2024 and will be reviewed by the administrator for 30 days , then every 14 days for 3 months. If no deficiencies noted then audits will be complete.

Licensee's Proposed Overall Completion Date: 11/13/2024

Implemented (█) - 11/21/2024)

227a - Support Plan 30 Days

4. Requirements

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

Resident #4's initial assessment, dated █, indicates the resident cannot self-administer medications. However, the resident's initial support plan, dated █, does not include a description of the resident's medication needs, the plan to meet his medication needs, or the responsible party.

227a - Support Plan 30 Days (continued)

Plan of Correction

Accept (█ - 11/20/2024)

Regulation 2600. 227 a. was violated by not having an initial written support plan updated with needs of resident # 4. Administrator completed support plan on █. Education was given to staff by administrator on how to complete a support plan and all its parts, education completed on █. Staff will notify administrator or designee when found and support plan will be completed as such. Audit of support plans will be conducted by Administrator or designee monthly starting 11/1/2024.

Licensee's Proposed Overall Completion Date: 11/13/2024

Implemented (█ - 11/21/2024)

227c - Support Plan Revision

5. Requirements

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Description of Violation

Resident #2's annual assessment, dated █, indicates the resident cannot self-administer medications. However, the resident's annual support plan, dated █, does not include a description of the resident's medication needs, the plan to meet his medication needs, or the responsible party.

Resident #3's annual assessment, dated █, indicates the resident cannot self-administer medications. However, the resident's annual support plan, dated █, does not include a description of the resident's medication needs, the plan to meet his medication needs, or the responsible party.

Plan of Correction

Accept (█ - 11/20/2024)

Regulation 2600 227 c. was violated by not having an annual support plan assessment updated with needs of residents # 2 and #3. Administrator completed support plan of resident #2 on █ and resident #3 on █. Education was given to staff by administrator on how to complete a support plan and all its parts, education was completed on █. Staff will notify administrator or designee when found and support plan will be completed as such. Audit of support plans will be conducted by Administrator or designee monthly starting █. Initial audit of current support plans was started on █ and completed on █.

Licensee's Proposed Overall Completion Date: 11/13/2024

Implemented (█ - 11/21/2024)