

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

November 15, 2024

[REDACTED]
PREMIER OAKWOOD TERRACE OPERATING LLC
[REDACTED]

RE: OAKWOOD TERRACE
400 GLEASON DRIVE
MOOSIC, PA, 18507
LICENSE/COC#: 22661

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/23/2024 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: OAKWOOD TERRACE License #: 22661 License Expiration: 10/23/2024
 Address: 400 GLEASON DRIVE, MOOSIC, PA 18507
 County: LACKAWANNA Region: NORTHEAST

Administrator

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

Legal Entity

Name: PREMIER OAKWOOD TERRACE OPERATING LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 07/02/1998 Issued By: L&I

Staffing Hours

Resident Support Staff: Total Daily Staff: 49 Waking Staff: 37

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Interim Exit Conference Date: 10/23/2024

Inspection Dates and Department Representative

10/23/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 58 Residents Served: 37
 Secured Dementia Care Unit
 In Home: Yes Area: Pine Capacity: 12 Residents Served: 6
 Hospice
 Current Residents: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 37
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 12 Have Physical Disability: 0

Inspections / Reviews

10/23/2024 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/09/2024

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

Inspections / Reviews *(continued)*

11/15/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/13/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

On [REDACTED], the home received written violation notice from the Moosic Borough Office of Code Enforcement and Zoning. The home was informed of their second false alarm, since 07/29/2023, and subsequently incurred a monetary fine due to violation of Moosic Borough's Chapter 72, section 72-2 B (2), relating to Alarms.

Plan of Correction

Accept [REDACTED] - 11/12/2024)

- 1. On 10/14/24 Oakwood terrace received a written violation from the Moosic Borough Office of Code Enforcement and Zoning. Oakwood terrace was informed that we had a second false alarm on 10/13/24. The code enforcement violations were paid on 11/5/24. This proof of payment is included. After investigation it was determined that the false alarm stemmed from a faulty sensor. Oakwood Terrace Immediately had our fire alarm company Johnson Controls come out on 10/21/24 and replace 5 smoke detectors that were older models. Additionally, they did a full inspection of the facilities smoke detectors. Included is the detailed report from Johnson Controls. Johnson Controls also will continue to do their semi-annual and annual inspections as intended.
- 2. On 10/21/24 Johnson Controls replaced 5 older model smoke detectors to ensure all smoke detectors in our facility were working as intended. Additionally, we have updated our maintenance director's environmental safety rounds tool to include monthly Johnson Controls point of contacts to ensure we are up to date on our semi and annual inspections of fire detector equipment. This tool is included.
- 3. On 11/7/24 [REDACTED] our facilities maintenance director was trained on the importance of ensuring Johnson Controls is scheduled their semiannual and annual fire safety equipment inspections. This training is included.
- 4. The executive director and designee Maintenance Director is responsible for the continue compliance of 2600.18.
- 5. We will monitor ongoing compliance with our newly revised maintenance director's environmental safety rounds tool. This tool is included. Additionally, Johnson Controls will continue doing their scheduled semiannual and annual fire safety equipment inspections.

Licensee's Proposed Overall Completion Date: 11/09/2024

Implemented [REDACTED] - 11/13/2024)

227d - Support Plan Medical/Dental

2. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident [REDACTED] requires verbal cueing to safely evacuate during fire drills. Resident [REDACTED] Assessment and Support Plan, dated 7/8/2024, documents that the resident is mobile. Additionally, their evacuation needs and plan to meet needs are documented as "N/A".

227d - Support Plan Medical/Dental (continued)

Repeat Violation 2/16/2024

Plan of Correction**Accept** [REDACTED] - 11/12/2024)

1. On 10/23/24 Resident [REDACTED] RASP was updated to reflect their updated mobility needs. Additionally, we have created a new mobility tool to reflect the mobility needs of our residents and their needs during emergencies. Resident [REDACTED] evacuation needs and plan to meet needs are documented properly now.
2. On 11/7/24 a 100% audit was conducted to ensure all current residents mobility needs match their support plans. This audit is included. Additionally, we have created a newly revamped emergency mobility needs tool that will be updated as residents' mobility needs change. This tool is included. Any updated mobility needs will be included on our newly implemented risk management tool that is done weekly by designee wellness director. This tool is included.
3. On 11/07/24 the designee wellness director was individually coached on the importance of ensuring all current and future residents mobility needs are updated in their RASP as needed. This training is included.
4. The executive director and the designee wellness director will be responsible for the continued compliance of ensuring all current and future residents mobility needs are updated as needed in their RASP.
5. Our newly implemented risk management tool including mobility needs updates will be completed weekly by wellness director. Our newly implemented emergency mobility needs tool will be updated as needed and reviewed monthly at QA meetings. The executive director or designee wellness director will be responsible for completing weekly audits for 3 months or until 100% compliance is achieved using our 2600.227d audit tool. The results will be discussed at our monthly QA meetings to ensure compliance is achieved. These audit tools are included.

Licensee's Proposed Overall Completion Date: 11/09/2024

Implemented [REDACTED] - 11/13/2024)