

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

January 2, 2025

[REDACTED]
BLUE MOUNTAIN PERSONAL CARE HOME, LLC
[REDACTED]

RE: POND VIEW MANOR
1115 MYRTLE ROAD
WALNUTPORT, PA, 18088
LICENSE/COC#: 23257

[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: POND VIEW MANOR License #: 23257 License Expiration: 08/15/2025
 Address: 1115 MYRTLE ROAD, WALNUTPORT, PA 18088
 County: NORTHAMPTON Region: NORTHEAST

Administrator

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

Legal Entity

Name: BLUE MOUNTAIN PERSONAL CARE HOME, LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 12/13/1996 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 6 Waking Staff: 5

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal 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: 8 Residents Served: 6
 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: 5
 Diagnosed with Mental Illness: 3 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

10/23/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/24/2024

12/04/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 12/21/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/11/2024

Inspections / Reviews *(continued)*

12/17/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/21/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/19/2024

01/02/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/21/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

25b - Contract Signatures

1. 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

Resident [redacted] resident home contract is not signed by the resident. The resident's Designated person did sign the contract. It is not documented that the resident was given the opportunity to sign, or if the resident refused or was unable to sign the contract.

Plan of Correction

Accept ([redacted] - 12/17/2024)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [redacted] by the Administrator, [redacted] to Audit all Resident files ensuring the residents have either signed or have been given the opportunity to sign their contracts.

To enhance the currently compliant operations, on [redacted] the Administrator, [redacted] will audit the resident contracts with a completion date of [redacted]

Effective 11/22/2024 the Administrator will perform monthly audits through 11/01/2025 to maintain ongoing compliance with having contract 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. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented ([redacted] - 12/23/2024)

51 - Criminal Background Check

2. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff Member C's first day of employment was [redacted]. A Pennsylvania State Police Criminal Background Check was not completed.

Plan of Correction

Accept ([redacted] - 12/17/2024)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [redacted] by the Administrator, [redacted] to ensure Criminal Background checks are done prior to employee start date.

To enhance the currently compliant operations, on each new employee's hire date the Administrator, [redacted] will audit the new employee file before the new employees start date with a completion date no later than the new employees start date.

51 Criminal Background Check (continued)

Effective 11/22/2024 the Administrator, [REDACTED] will perform a staff wide audit of employee files January through January to maintain ongoing compliance with Criminal background checks. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented [REDACTED] - 12/23/2024)

141a 1-10 Medical Evaluation Information

3. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident [REDACTED] initial Documentation of Medical Evaluation dated [REDACTED] does not note the resident's pulse rate or temperature.

Plan of Correction

Accept [REDACTED] - 12/17/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] by the Administrator, [REDACTED] to Document the resident's pulse rate and temperature.

To enhance the currently compliant operations, on [REDACTED] the Administrator, [REDACTED] will Audit the PCPs of all Residents ensuring all necessary information on the PCP is filled in completely with a completion date of [REDACTED]

Effective [REDACTED] the Administrator, [REDACTED] will perform an audit of all PCP forms from resident move in date through [REDACTED] to maintain ongoing compliance with 141a 1 10 Medical Evaluation Information. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented [REDACTED] - 12/23/2024)

182b Prescription Medication

4. Requirements

2600.

182.b. Prescription medication that is not self administered by a resident shall be administered by one of the following:

Description of Violation

On [redacted] it was observed on Resident [redacted] and Resident [redacted] Medication Administration records that Staff Member D passed medications in the home on [redacted]. The Staff member last completed the annual practicum for medication administration on [redacted] greater than one year prior to when the medication was passed.

Plan of Correction

Accept [redacted] - 12/17/2024)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [redacted] by the Administrator, [redacted] to Ensure medications are only passed by staff members who have completed the annual training practicum for medication administration.

To enhance the currently compliant operations, on [redacted] the Administrator, [redacted] will audit each staff members annual medication practicum, with a completion date of [redacted].

Effective [redacted] the Administrator, [redacted] will perform quarterly audits through [redacted] to maintain ongoing compliance with ensuring prescription medication that is not self-administered by a resident shall be administered by a facility med tech. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented [redacted] - 01/02/2025)

185a Implement Storage Procedures

5. 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

Resident [redacted] has an order for blood glucose checks to be completed once weekly on Saturdays at 8am. The resident had a [redacted] reading of [redacted] on [redacted] as noted in the resident's glucometer. The [redacted] reading was not documented by the staff member who took the reading.

Resident [redacted] has an order for [redacted] checks to be completed once daily at 8am. The resident's blood glucose reading was documented by staff as [redacted] on [redacted] at 8am. The resident's glucometer noted a blood glucose reading of [redacted]

Plan of Correction

Accept [redacted] - 12/17/2024)

In response to the violation on 10/23/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/22/2024 by the Administrator, Kelly Nassoor to ensure blood glucose levels are completed as required for each resident that has blood glucose monitoring orders.

185a - Implement Storage Procedures (continued)

To enhance the currently compliant operations, on [REDACTED] the Administrator, [REDACTED] will take and properly document resident [REDACTED] levels, with a completion date of 12/11/2024.

Effective [REDACTED] the Administrator, [REDACTED] will perform weekly inspections through [REDACTED], renewing annually to maintain ongoing compliance with ensuring the home will develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented [REDACTED] - 12/23/2024)

190a - Completion Medication Course

6. Requirements

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

On [REDACTED] it was observed on Resident [REDACTED] and Resident [REDACTED] Medication Administration records that Staff Member D administered medications in the home on [REDACTED]. The Staff member last completed the annual practicum for medication administration on [REDACTED] greater than one year prior to when the medication was administered.

Plan of Correction

Accept [REDACTED] - 12/17/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] by the Administrator, [REDACTED] to ensure that any staff member administering medications has completed their annual medication administration practicum for the current calendar year not to exceed one year since updating the practicum.

To enhance the currently compliant operations, on [REDACTED] the Administrator, [REDACTED] will complete the annual practicum for medication administration on or before the anniversary of the staff members last completion of the practicum, with a completion date of [REDACTED]

Effective [REDACTED] the Administrator, [REDACTED] will perform annual audits through [REDACTED] to maintain ongoing compliance with Ensuring that A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and [REDACTED] for insect bites or other allergies. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/31/2025

Implemented [REDACTED] - 01/02/2025)

190b Insulin Injections

7. Requirements

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department approved medications administration course that includes the passing of a written performance based competency test within the past 2 years, as well as successful completion of a Department approved diabetes patient education program within the past 12 months.

Description of Violation

There was no documentation that Staff Member A and Staff Member B completed Diabetes education training during calendar year 2024. Both staff last completed Diabetic training in April 2023 and have administered insulin to Resident [REDACTED] the month of October 2024.

Plan of Correction

Accept [REDACTED] 12/17/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] by the Administrator, [REDACTED] to complete Diabetes training.

To enhance the currently compliant operations, on [REDACTED] the Administrator, [REDACTED] will maintain their annual Diabetes training, with a completion date of [REDACTED]

Effective [REDACTED] the Administrator, [REDACTED] will perform annual audits through [REDACTED] and continuing annually to maintain ongoing compliance with ensuring that A staff person is permitted to administer [REDACTED] following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past year, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/11/2024

Implemented [REDACTED] - 01/02/2025)