

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

February 7, 2025

[REDACTED], ADMINISTRATOR
JAMC OPCO LLC
[REDACTED]

RE: JAMESON SENIOR LIVING
3345 WILMINGTON ROAD
NEW CASTLE, PA, 16105
LICENSE/COC#: 45578

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/18/2024 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: *JAMESON SENIOR LIVING* License #: *45578* License Expiration: *09/01/2025*
 Address: *3345 WILMINGTON ROAD, NEW CASTLE, PA 16105*
 County: *LAWRENCE* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *JAMC OPCO LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *03/03/1998* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *29* Waking Staff: *22*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *12/18/2024*

Inspection Dates and Department Representative

12/18/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *71* Residents Served: *29*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *29*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

12/18/2024 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/20/2025*

01/24/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: *02/04/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/29/2025*

Inspections / Reviews (*continued*)

01/29/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/04/2025

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 02/12/2025

02/07/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/04/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

132g - Fire Drills Days/Times

1. Requirements

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home routinely schedules 2 staff persons on the night shift. However, the following fire drills were conducted with 4 staff persons:

- 5/23/24 at 6:45 a.m.
- 10/25/24 at 6:30 a.m.

Plan of Correction

Accept ([redacted] - 01/29/2025)

In response to the violation on 12/18/2024 by the Pennsylvania Bureau of Human Service Licensing, the immediate action that was taken was to review the regulations and then hold a nighttime fire drill using only the typical 2 staff members present. The drill was held on 1/15/24. It was a successful drill, no issues reported.

To enhance the currently compliant operations, the Administrator will hold fire drills using only the staff regularly scheduled. The requirement is to hold a fire drill once a month on various days at various times using only the typical staff present for that shift. The end date is 1-15-26 but this regulation is an ongoing and will be maintained as such. Effective 01/15/2025 the Administrator will perform monthly fire drills indefinitely as required to maintain ongoing compliance. Any issues will be corrected immediately, and drills will be documented and reviewed internally for continuous improvement purposes. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Administrator for further review and continuous improvement.

Additional education is being provided to the staff regarding the need for fire drills, the procedures we adhere to and the regulation we need to follow to maintain compliance. I will attach sign in sheet as soon as all staff has been educated, with a completion date of 02/03/2025.

Proposed Overall Completion Date: 02/03/2025

Licensee's Proposed Overall Completion Date: 02/03/2025

Implemented ([redacted] - 02/07/2025)

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.

184a - Resident's Meds Labeled (continued)

Description of Violation

Resident #1 was prescribed Furosemide 20mg – 1 tablet daily; however, the label on resident #1's Furosemide indicates this resident takes Furosemide 20mg – 1 tablet on Monday, Wednesday, and Friday.

Plan of Correction

Accept ([redacted] - 01/24/2025)

In response to the violation on 12/18/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/18/2024 by the LPN to verify the order and place a corrective action/change of order sticker on the prescription bottle.

To enhance the currently compliant operations:

1. The LPN and all med techs will be reeducated on the importance of identifying and labeling any changes in orders by placing an indicator such as an order change sticker on or near the prescription label when as order is changed. Also included in the education are what is needed on a medication label to maintain compliance. Education will be completed by 1/22/25.

Effective immediately the LPN and Med Techs will perform med cart audits weekly for 2 months to maintain ongoing compliance. Any discrepancies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 03/15/2025

Implemented ([redacted] - 02/07/2025)

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:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident #1 was prescribed Melatonin 3mg – 1 tablet at bedtime; however, resident #1's December 2024 medication administration record (MAR) does not indicate that this medication must be administered at bedtime.

187a - Medication Record (continued)

Resident #1g was prescribed Ibuprofen 400mg – 1 tablet every 8 hours as needed for pain; however, resident #1 's December 2024 MAR indicates the resident Ibuprofen 400mg – 1 tablet daily.

Resident #1 was prescribed Cephalexin 500mg – 1 capsule daily. This medication was not included on resident #1's December 2024 MAR.

Resident #2 was prescribed Levothyroxine 50mcg – 25mcg in the morning every Monday, Wednesday, and Friday and 50mcg in the morning every Tuesday, Thursday, Saturday, and Sunday; however, resident #2 's December 2024 MAR indicates [REDACTED] takes Levothyroxine 25mcg – 1 tablet daily and Levothyroxine 50mcg – 1 tablet daily.

Resident #2 was prescribed Acetaminophen 325mg – 2 tablets every 6 hours as needed for pain; however, resident #2's December 2024 MAR indicates the resident takes Acetaminophen 325mg – 2 tablets daily.

Plan of Correction

Accept ([REDACTED] - 01/29/2025)

In response to the violation on 12/18/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/18/24 by the LPN to address all MAR discrepancies to the best of [REDACTED] ability at that time and to ensure all medications were correctly entered on the MAR.

At the time of inspection our facility was undergoing a change in EHR systems. The old system had several limitations regarding how the medications could be charted and how orders were entered in. For example, a medication that was to be given every other day was not able to be entered that way. The EMAR would indicate it was to be taken daily. We were able to enter information in the notes such as "medication to be administered M, W, F" but not on the actual EMAR. Also, there was no way to show a medication was a PRN. Instead, it was seen as a regular medication unless you looked in the notes. We experienced several other malfunctions and issues while the creators of the EMAR worked to correct the problems we were experiencing. The staff here worked very hard to communicate with each other and the administrator any issues they saw. These reasons and several others are why I insisted on a new system.

We are now up and running with a new EHR system. All medication orders have been entered correctly and are now being documented properly.

We continue to monitor this daily and make corrections. Monitoring will continue indefinitely.

To enhance compliance, additional education is being provided to all medication administration staff regarding the information that is needed on the MAR. This will be completed by 2-3-25. Education is included with the new EHR system, and the system is a self-checking system. When entering a new order, it takes the person entering the information step by step through all necessary fields. It will not accept an incomplete order. The administrator will continue to monitor MAR entries randomly.

Proposed Overall Completion Date: 02/03/2025

Licensee's Proposed Overall Completion Date: 02/03/2025

Implemented ([REDACTED] - 02/07/2025)

187b - Date/Time of Medication Admin.**4. Requirements**

187b - Date/Time of Medication Admin. (continued)

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 #3 self-administers [REDACTED] medications; however, staff have initialed resident # 3's December 2024 MAR for several medications including Gabapentin 100mg, 2 capsules daily.

Plan of Correction

Accept ([REDACTED] - 01/24/2025)

In response to the violation on 12/18/24 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/18/24 by the Administrator to instruct all staff to stop documenting on medications administered by a self-administering resident.

To reenforce the currently compliant operations, on 1/15/25 the administrator reeducated the medication administering staff regarding the documentation process of a self-administering resident.

The old EHR system we were unable to designate the resident as a self-administering resident. Staff were unsure what to do so they were marking her meds as given. The new system does not allow this to happen.

Regardless of the change in systems, the Administrator will continue to audit ECP for any issues or changes with regard to self-administering residents' status. This monitoring will continue weekly until 3/15/25 to maintain ongoing compliance. Any issues will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 03/15/2025

Implemented ([REDACTED] - 02/07/2025)

187d - Follow Prescriber's Orders

5. Requirements

2600.

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

Description of Violation

Resident #1 was prescribed Hydralazine 25mg – 1 tablet 3 times daily; however, this medication was administered 2 times on 12/2/24 and 12/10/24 and 4 times on 12/1/24, 12/3/24, 12/5/24, and 12/6/24.

Resident #2 was prescribed Levothyroxine 50mcg – 25mcg in the morning every Monday, Wednesday, and Friday. Staff administered this medication on Tuesday 12/2/24, Saturday 12/14/24, and Sunday 12/15/24.

Resident #2 was prescribed Sertraline 50mg – 1 tablet at bedtime; however, from 12/1/24 to 12/18/24 this medication was administered before 12:00 PM.

Plan of Correction

Accept ([REDACTED] - 01/29/2025)

In response to the violation on 12/18/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/18/25 by the Administrator to review the medications in question and review the orders. We verified the correct orders and ensure the MAR was correct going forward.

With the installation and implementation of the new EMAR system all resident medications have been reviewed and confirmed. We are fully integrated into the new system. This system has safety measures in place to hold accountability that the previous system did not. The administrator is alerted to any missed meds and other discrepancies.

187d - Follow Prescriber's Orders (continued)

This will continue to be monitored by the administrator as well as the medication administration staff.

To enhance compliance the administrator will continue to educate the med techs and LPN on the extreme importance of following prescribers orders. The administrator will also continue to do random checks of the system by choosing a resident and doing an audit of their medications. The administrator will do this bi-weekly for 2 months. The ECP system also alerts the administrator and the medication administration staff if a medication is missed or charted incorrectly. All medication administration staff will monitor each other daily.

Proposed Overall Completion Date: 03/28/2025

Licensee's Proposed Overall Completion Date: 03/28/2025

Implemented (█ - 02/07/2025)