

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

May 8, 2025

[REDACTED], ADMINISTRATOR
BROAD ACRES NURSING HOME ASSOCIATION
[REDACTED]

RE: COUNTRY TERRACE
1919 SHUMWAY HILL ROAD
WELLSBORO, PA, 16901
LICENSE/COC#: 23501

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/15/2025 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: *COUNTRY TERRACE* License #: *23501* License Expiration: *03/26/2026*
 Address: *1919 SHUMWAY HILL ROAD, WELLSBORO, PA 16901*
 County: *TIOGA* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *BROAD ACRES NURSING HOME ASSOCIATION*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *07/13/1999* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *40* Waking Staff: *30*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal, Incident* Exit Conference Date: *04/15/2025*

Inspection Dates and Department Representative

04/15/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* Residents Served: *40*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *40*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

04/15/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/12/2025*

05/08/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: *05/08/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

05/08/2025 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/08/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

182c - Medication Administration

1. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

- 6. Place the medication in the resident’s hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).

Description of Violation

On 3/19/25 the following medication error occurred as a result of the med tech not following the medication administration process steps. The prescribed medication Zyprexa for resident #1, to be administered on 3/19/25 at 2PM, was left in the room of resident #2 by the med tech and subsequently ingested by this resident who does not have an order for prescribed Zyprexa.

Plan of Correction

Accept ([redacted]) - 05/08/2025)

In response to the violation on 04/15/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 03/21/2025 by the Wellness Coordinator and administrator. wellness coordinator re-educated staff member on the administration portion of the med training program. Medication and Mar review was also completed on this date. Medication error policy also review with staff member. On 3/19 after finding the medication error the residents pcp was contacted and incident report was completed and sent to DHS.

To enhance the currently compliant operations, on 05/05/2025 the Administrator will re-educate the current medication administration staff on Regulation 182 as well as the General rules for medication administration, the medication preparation and administration policy and the general policies of medication administration by the Administrator, with a completion date of 05/09/2025.

Effective 05/05/2025 the administrator, [redacted] designee will perform monthly review with staff at staff in-services, periodic room audits through 8/06/2025 to maintain ongoing compliance with ensuring medication administration includes the following activities, based on the needs of the resident. This includes, placing the medication in the resident’s hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4). staff, room audits periodically through 11/06/2025 to maintain ongoing compliance with ensuring the home must follow the directions of the prescriber.

Will continue to monitor for compliance during Quality Assurance meetings.

Will review at monthly staff meetings for next 3 months. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Administrator, [redacted] designee for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 05/09/2025

Implemented ([redacted]) - 05/08/2025)

187d - Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

On 3/19/25 resident #1 did not receive the prescribed medication Zyprexa for administration at 2 PM until 6:15 PM.

187d - Follow Prescriber's Orders (continued)

On 3/19/25 resident #2 ingested Zyprexa that was prescribed for resident #1.

Repeat Violation: 7/9/2024

Plan of Correction

Accept (█ - 05/08/2025)

In response to the violation on 04/15/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 03/21/2025 by the Wellness coordinator to On 3/21/2025 wellness coordinator re-educated staff member on the administration portion of the med training program. Medication and Mar review was also completed on this date. Medication error policy also review with staff member.

On 3/19 after finding the medication error the residents pcp was contacted and incident report was completed and sent to DHS.

To enhance the currently compliant operations, on 05/06/2025 the Administrator will By 5/9 current medication administration staff will be re-educated on Regulation 187d. as well as the General rules for medication administration, the medication preparation and administration policy and the general policies of medication administration by the Administrator, with a completion date of 05/10/2025.

Effective 05/05/2025 the administrator, █ designee will perform monthly review with staff at staff in-services, periodic room audits through 8/06/2025 to maintain ongoing compliance with ensuring medication administration includes the following activities, based on the needs of the resident. This includes, placing the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4). staff, room audits periodically through 8/06/2025 to maintain ongoing compliance with ensuring the home must follow the directions of the prescriber.

Will continue to monitor for compliance during Quality Assurance meetings.

Will review at monthly staff meetings for next 3 months. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Administrator, █ designee for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 05/10/2025

Implemented (█ - 05/08/2025)