

Department of Human Services
Bureau of Human Service Licensing

October 14, 2020

CHRISTIAN CUMMINGS, PRESIDENT
EC OPCO SC LLC
5885 MEADOWS ROAD, SUITE 500
ECLIPSE SR LIV ATTN LICENSING
LAKE OSWEGO, OR 97035

RE: ELMCROFT OF STATE COLLEGE
150 FARMSTEAD LANE
STATE COLLEGE, PA, 16803
LICENSE/COC#: 23374

Dear Mr. Cummings,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/05/2020, 08/06/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *ELMCROFT OF STATE COLLEGE* License #: *23374* License Expiration Date: *07/03/2021*
 Address: *150 FARMSTEAD LANE, STATE COLLEGE, PA 16803*
 County: *CENTRE* Region: *NORTHEAST*

Administrator

Name: *Heather Rosamilia* Phone: *8142357675* Email:
heather.loucks@elmcraft.com, lindscott@pa.gov, mmoskalczy@pa.gov

Legal Entity

Name: *EC OPCO SC LLC*
 Address: *5885 MEADOWS ROAD, SUITE 500, ECLIPSE SR LIV ATTN LICENSING, LAKE OSWEGO, OR, 97035*
 Phone: *8142357675* Email: *DBAKER@VENTASREIT.COM*

Certificate(s) of Occupancy

Type: *I-2* Date: *08/02/2010* Issued By: *Centre Region Code Admin*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *68* Waking Staff: *51*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *08/05/2020*

Inspection Dates and Department Representative

08/05/2020 - On-Site: Pamela Harris
08/06/2020 - On-Site: Pamela Harris

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* Residents Served: *44*

Secured Dementia Care Unit

In Home: *Yes* Area: *0* Capacity: *20* Residents Served: *16*

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *42*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *24* Have Physical Disability: *0*

Inspections / Reviews

08/05/2020 - Partial

Lead Inspector: *Pamela Harris*Follow-Up Type: *POC Submission*Follow-Up Date: *09/21/2020*

9/29/2020 - POC Submission

Lead Reviewer: *Michele Moskalczyk*Follow-Up Type: *Document Submission*Follow-Up Date: *10/06/2020*

10/14/2020 - Document Submission

Lead Reviewer: *Michele Moskalczyk*Follow-Up Type: *Not Required*

183f - Discontinued Medications

1. Requirements

2600.

183.f. Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

Description of Violation

The following medications, Amlodipine 5mg, Atenolol 50mg, Eliquis 2.5mg, Glizipide 5mg, Losartan 100 mg, Omeprazole 20mg, Seroquel 50mg, belonging to resident 2 were disposed of in the garbage at Med Cart 2, when the resident refused to take the medication. This is not an approved method of destroying medications according to the Department of Environmental Protection and Federal and State regulation.

Plan of Correction

Accept

1-1-20 Associate [redacted] was counseled and reeducated on proper disposal of medications by her supervisor at the time incident occurred [redacted]. Associated resigned position on February 28, 2020 with her last date of employment being March 13,2020.

On 7-21-20 Nurse/Resident service director and Executive Director re-educated all Med Techs on proper medication disposal and storage.

Executive Director and or designee will monitor proper disposal of medication with weekly cart audits and reviewed at monthly QA meeting for next 3 months.

Completion Date: 11/30/2020

Update - 09/29/2020

Please send proof of Med Tech's re-education.

Document Submission

Implemented

Attached the document

187a - Medication Record

1. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident 1 was prescribed Cephalexain 500 mg cap, take one capsule by mouth twice a day for 10 days. The medication record does not indicate a diagnosis for the medication. The medication record must indicate a diagnosis or reason for the medication.

187a - Medication Record (continued)

Plan of Correction

Accept

8-6-20 an Audit by nurse/Resident Service Director was conducted on all current residents' medication record to ensure that a diagnosis is listed for each medication.

Resident Service Director will re-train all nurse and med Tech that for each medication a resident is prescribed must have a diagnosis by end of September 2020.

Nurse and or designee will monitor resident's medication record as part of weekly medication cart audit to ensure all medication have a diagnosis and reviewed monthly at QA meetings.

Completion Date: 09/30/2020

Update - 09/29/2020

Pease send proof of training:

Resident Service Director will re-train all nurse and med Tech that for each medication a resident is prescribed must have a diagnosis by end of September 2020.

Document Submission

Implemented

Attached the document