

Department of Human Services
Bureau of Human Service Licensing

January 5, 2021

[REDACTED] 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 [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/17/2020 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* **Licence #:** *23374* **Licence Expiration Date:** *07/03/2021*
Address: *150 FARMSTEAD LANE, STATE COLLEGE, PA 16803*
County: *CENTRE* **Region:** *NORTHEAST*

Administrator

Name: [REDACTED] **Phone:** *8142357675* **Email:**
[REDACTED]

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:** [REDACTED]

Certificate(s) of Occupancy

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

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff:** *64* **Waking Staff:** *48*

Inspection

Type: *Partial* **Notice:** *Unannounced* **BHA Docket #:**
Reason: *Complaint* **Exit Conference Date:** *11/17/2020*

Inspection Dates and Department Representative

11/17/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* **Residents Served:** *43*

Secured Dementia Care Unit

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

Hospice

Current Resident: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older:** *43*
Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability:** *0*
Have Mobility Need: *21* **Have Physical Disability:** *0*

Inspections / Reviews

11/17/2020 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *12/11/2020*

12/15/2020 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *12/22/2020*

1/5/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On 10/20/20 staff person A witnessed staff person B taking resident #1 by the arm and telling ■■■ to "get out of my dining room" after resident #1 started throwing ■■■ dessert on the floor. Staff person B told resident #1 "You're going to your room" and then led the resident out of the dining room. Staff person A did not report the incident to the administrator. Information regarding the incident was received through a complaint.

Plan of Correction

Accept

Training: Reeducated of all staff on the Older Adult Protective Services Act in relation to reporting suspected abuse and who they are to report suspected abuse too.

Ongoing ED and or designee monitor will monitor and educated staff to ensure suspected abuse or neglect are reported and investigated by interviewing 3 staff monthly for the next 3 months.

Completion Date: 12/31/2020

Update - 12/15/2020

Please send/attach proof of staff training.

Document Submission

Implemented

Attached the training sign in log

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident #1 resides in the home's secure dementia unit due to a diagnosis of dementia. On 10/20/20, resident #1 began throwing ■■■ dessert on the floor, which led staff person B to take resident #1 by the arm and lead ■■■ out of the dining room, telling the resident "get out of my dining room" and "you're going to your room". The incident was witnessed by staff person A according to staff interviews and a complaint received by the department. The resident was not treated with dignity and respect.

Plan of Correction

Accept

Employee was suspended on 11.17.20 upon the outcome of investigation and then termination of employment Completed 12/3/2020

Reeducation of all staff on treating residents with dignity and respect. Completion by 12/31/2020

Ongoing ED and or designee will interview 3 residents a month for the next 3 months to ensure treated with respect and dignity and reviewed monthly at QA meeting.

Completion Date: 12/31/2020

42c - Treatment of Residents (continued)

Update - 12/15/2020

Please send/attach proof of staff training.

Document Submission

Implemented

Attached the training sign in sheet

234d - Support Plan Revision

1. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

Resident #1 has a history of frequent falls, some with injuries and/or needing to be evaluated at the hospital. Falls occurred on the following dates: 7/11/20 (resident suffered a hip fracture), 8/15/20, 8/26/20, 09/20/20, 10/1/20, 10/17/20, 10/31/20, 11/4/20, and 11/10/20. The resident's support plan dated 10/27/20 was not updated to reflect the need for increased supervision due to falls and did not include a plan to address and decrease the resident's falls. The resident's record also indicates the resident is often combative with staff. The support plan also did not address the resident's behaviors.

Plan of Correction

Accept

Support plan for resident #1 was updated by nurse. Completed 11/17/2020

Training: Nurses will be re-educated on importance of keeping Service plan/support plan current and accurate by 12-31-20

ED and or designee will Review 10% of residents support plan monthly to ensure all resident's needs are captured and updated for the next 3 month and will review at monthly QA.

Completion Date: 12/31/2020

Update - 12/15/2020

Please send/attach Resident #1's updated RASP.

Document Submission

Implemented

Attached the RASP