## Department of Human Services Bureau of Human Service Licensing

June 28, 2021

ADMINISTRATOR

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

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/13/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

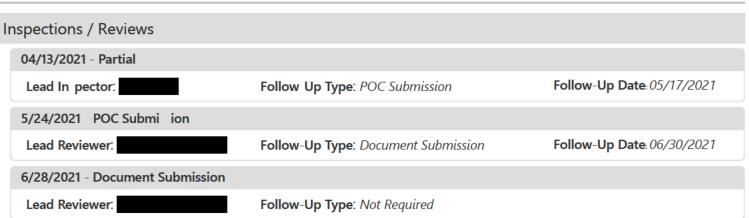
Sincerely, Michele Moskalczyk Human Services Licensing Supervisor

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 Addre : 150 FARMSTEAD LANE, STATE	COLLEGE, PA 16803	Licen e #: 23374	Licen e Expiration Date: 07/03/2021
County: CENTRE	Region: NORTHEAST		
Administrator			
Name:	Phone: 8142357675	Email:	
Legal Entity			
Name: EC OPCO SC LLCAddress: 5885 MEADOWS ROAD, SUITEPhone: 8142357675Email:	E 500, ECLIPSE SR LIV AT	TN LICENSING, LAK	'E OSWEGO, OR, 97035
Certificate(s) of Occupancy			
Туре: І-2	Date: 08/02/2010		Issued By: Centre County Region
Staffing Hours			
Resident Support Staff: 0	Total Daily Staff: 37		Waking Staff: 28
Inspection			
Type: Partial Rea on: Complaint,Incident	Notice: Unannounce	d	BHA Docket #: Exit Conference Date: 04/13/2021
Inspection Dates and Department Representative			
04/13/2021 - On-Site:			
Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: 60		Residents Serve	<b>d</b> : 16
Secured Dementia Care Unit			
In Home: Yes Are	a: Connections	Capacity: 20	Residents Served: 15
Hospice			
Current Re ident : 3			
Number of Residents Who:			
Receive Supplemental Security Income: 0 Diagnosed with Mental Illness: 0		Are 60 Years of Age or Older: 31 Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 21		Have Physical Disability: 0	



## 42b - Abuse

#### 1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

## **Description of Repeat Violation**

Resident 1 hit Resident 2 in \_\_\_\_\_ lip. This caused Resident 2 to get a swollen lip and what staff described as a small cut on the inside of \_\_\_\_\_ lip. Resident 1 has previous history of physical altercations with residents.

## Plan of Correction

All staff will complete the electronic course in Relias called The Dementia Made Me Do It by 6.12.21 All direct care staff will be re-rained on behavior expressions by 6-30-21 by company VP of memory care. Any resident that exhibits behaviors will be reviewed at weekly clinical quality meeting.

Completion Date: 06/30/2021

Update - 05/24/2021

Please send/Attach proof of staff training. 5-24-2021 -MM

## Document Submission

POC was completed

## 187d - Follow Prescriber's Orders

#### 1. Requirements

2600.

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

## **Description of Violation**

Resident 1 is prescribed daily 1 50mg tab of Trazodone at 8pm and ½ tab of trazadone at 4pm. The medications were unavailable on 3/29/2021 and unable to be administered per the prescriber's order.

## Plan of Correction

*Executive director will re-train nurse and med tech on regulation 187d by 5-21-21 Nurse or designee will conduct weekly audits of med carts and ensure all medication are available and obtain any new/reorder medication scripts prior to medication running out. Audit will be reviewed at monthly QA meeting.* 

Completion Date: 05/21/2021

## Update - 05/24/2021

Please send/Attach proof of staff training. 5-24-2021 - MM

## **Document Submission**

POC was completed

Accept

#### Implemented

Accept

Implemented