

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

December 4, 2022

[REDACTED]  
GREEN RIDGE PERSONAL CARE LLC  
[REDACTED]  
[REDACTED]

RE: THE GARDENS OF GREEN RIDGE  
2751 BOULEVARD AVENUE  
SCRANTON, PA, 18509  
LICENSE/COC#: 22516

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/20/2022 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]  
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

Name: *THE GARDENS OF GREEN RIDGE* License #: *22516* License Expiration: *11/05/2023*  
 Address: *2751 BOULEVARD AVENUE, SCRANTON, PA 18509*  
 County: *LACKAWANNA* Region: *NORTHEAST*

## Administrator

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

## Legal Entity

Name: *GREEN RIDGE PERSONAL CARE LLC*  
 Address: *23700 COMMERCE PARK, BEACHWOOD, OH, 44122*  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: *I-1* Date: *09/02/2013* Issued By: *City of Scranton*

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *79* Waking Staff: *59*

## Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal* Exit Conference Date: *10/20/2022*

## Inspection Dates and Department Representative

10/20/2022 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: *74* Residents Served: *57*

## Special Care Unit

In Home: *Yes* Area: *1st floor* Capacity: *24* Residents Served: *19*

## Hospice

Current Residents: *6*

## Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *57*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *22* Have Physical Disability: *1*

## Inspections / Reviews

## 10/20/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/14/2022*

## 11/20/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: *11/21/2022*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *11/28/2022*

Inspections / Reviews *(continued)*

12/04/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2022

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 101j7 Lighting/operable lamp

**1. Requirements**

2800.

101.j. Each resident shall have the following in the living unit:

7. An operable lamp or other source of lighting that can be turned on at bedside.

**Description of Violation**

*Resident #1 did not have an operable lamp or other source of lighting that could be turned on at bedside.*

**Plan of Correction****Accept (MM - 11/20/2022)**

*Resident #1 did have a working lamp at bedside table however the working lamp at the bedside table was not close enough to the bed per inspectors' evaluation.*

*To ensure lamp was at close enough reach, lamp was adjusted closer to the bedside for Resident #1.*

*Additionally, regulation 101(j)(7) was reviewed with housekeeping staff, Director of Maintenance, Assistant Administrator, and Administrative Assistant. Staff in-service will monitor for compliance with 101(j)(7).*

*Re-education/Re-in-service training document from RCG can be submitted as part of plan for correction.*

**Licensee's Proposed Overall Completion Date: 11/08/2022**

**Implemented (MM - 12/04/2022)**

## 182b Prescription medication

**2. Requirements**

2800.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

4. A staff person who has completed the medication administration training as specified in § 2800.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

**Description of Violation**

*Staff A annual practicum for MedTech training does not indicate date Staff A initially completed initial MedTech training. The annual re-certification does not indicate completion date, recertified or failed to recertify, Trainer's signature, a date the re-certification was completed, or the providers name.*

**Plan of Correction****Accept (MM - 11/20/2022)**

*Staff Member A annual practicum was completed. The forms annual re-certification trainer signature and date was not filled in by certified trainer. At time of annual inspection onsite inspector educated certified trainer on proper/required signature /date sections.*

*Form was correctly signed and dated accordingly at time of inspection.*

*In an effort to remain in compliance with 2800.182(b) Director of Nursing will monitor for compliance.*

*Corrected form can be submitted as part of corrected compliance.*

**Licensee's Proposed Overall Completion Date: 11/08/2022**

**Implemented (MM - 12/04/2022)**

## 185a Storage procedures

**3. Requirements**

2800.

185.a. The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

*Resident #2's glucometer was not calibrated to the correct time.*

**Plan of Correction****Accept (MM - 11/20/2022)**

*Resident # 2's glucometer battery was changed, and the correct time was not calibrated to the glucometer.*

*Director of Nursing reviewed proper calibration with Med-Techs in regard to 2800.185(a). Med-Techs In-serviced on 2800.185(a).*

*Director of Nursing at time of inspection properly calibrated residents' glucometer.*

*Director of Nursing and LPN Supervisor will monitor glucometers for compliance.*

*Re-education/Re-in-service training documents will be submitted as part of plan for compliance.*

**Licensee's Proposed Overall Completion Date: 11/08/2022**

**Implemented (MM - 12/04/2022)**

## 187d Follow prescriber's orders

**4. Requirements**

2800.

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

**Description of Violation**

*Resident #3 is on a sliding scale that begins when Resident #3s blood glucose level is 200 or higher. When Resident #3's blood glucose is lower than 200, no additional insulin (Novolog) is required. On 10/7/22, Resident #3's blood glucose was 164 at 7am. Resident #3 received 2 units of Novolog.*

**Plan of Correction****Accept (MM - 11/20/2022)**

*Director of Nursing re-reviewed diabetic training material with Med-Techs as it not only related to 2800.187(d)but overall diabetic re-review.*

*Med-Techs were re-instructed on Resident 3's prescribed order regarding noted insulin parameters.*

*Director of Nursing and LPN Supervisor will monitor Med-Tech's, MAR, and Glucometers to ensure there are no additional errors as it relates to 2800.187(d)*

*Administrator will consult with Director of Nursing to ensure 2800.187(d) is remaining in compliance.*

*Re-education/Re-In-service training documents will be submitted as apart of plan for compliance.*

**Licensee's Proposed Overall Completion Date: 11/08/2022**

**Implemented (MM - 12/04/2022)**