

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

October 4, 2023

[REDACTED]
PROVIDENCE PLACE OF HAZLETON ASSOCIATES
[REDACTED]

RE: PROVIDENCE PLACE OF HAZLETON
149 SOUTH HUNTER HIGHWAY
DRUMS, PA, 18222
LICENSE/COC#: 22760

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/30/2023 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: PROVIDENCE PLACE OF HAZLETON License #: 22760 License Expiration: 04/01/2024
Address: 149 SOUTH HUNTER HIGHWAY, DRUMS, PA 18222
County: LUZERNE Region: NORTHEAST

Administrator

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

Legal Entity

Name: PROVIDENCE PLACE OF HAZLETON ASSOCIATES
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 08/16/2010 Issued By: Butler Twp

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 132 Waking Staff: 99

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 08/30/2023

Inspection Dates and Department Representative

08/30/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 155 Residents Served: 92
Special Care Unit
In Home: Yes Area: Connections Capacity: 42 Residents Served: 26
Hospice
Current Residents: 9
Number of Residents Who:
Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 92
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 40 Have Physical Disability: 1

Inspections / Reviews

08/30/2023 - Partial
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/28/2023

Inspections / Reviews (*continued*)

09/26/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/03/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 09/29/2023

10/02/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/03/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/05/2023

10/04/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/03/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

225b Assessment content

3. Requirements

2800.

225.b. The assessment must, at a minimum include the following:

Description of Violation

The Assessment and Support Plan for Resident 2 dated 10/1/2022, has an assessment of minimal mobility needs on page 6 however does not list the minimal mobility need or a plan to meet the need.

Plan of Correction

Accept (█ - 10/02/2023)

█ Executive Director immediately fixed the mobility need and plan to meet need on 8/30/2023. Beginning 8/31/2023 █ Director of Nursing will review every care plan then bring the careplan to Executive Director, █ to review. Once Executive Director reviews careplan and confirms there are not any mistakes or blank spaces Executive Director will return careplan to Director of Nursing to be signed and dated by all participants. Please see attached document.

Licensee's Proposed Overall Completion Date: 09/28/2023

Implemented (█ - 10/04/2023)

227g Support plan - signatures

4. Requirements

2800.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

The Assessment and Support Plan for Resident 1 admitted 1-9-23, was not dated when signed by the assessor or the resident.

Plan of Correction

Accept (█ - 10/02/2023)

On 8/30/2023 Director of Nursing █ immediately reviewed date that care plan was printed and signed and added dates to the care plan to correct violation. Beginning 8/31/2023 █ Director of Nursing will review every care plan then bring the care plan to Executive Director, █ to review. Once Executive Director reviews care plan and confirms there are not any mistakes or blank spaces Executive Director will return careplan to Director of Nursing to be signed and dated by all participants. Once all participants have signed and dated care plan Executive Director █ will then sign and date care plan and place it in residents chart. Please see attached document.

Licensee's Proposed Overall Completion Date: 09/28/2023

Implemented (█ - 10/04/2023)