



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17102-1810

ADULT RESIDENTIAL LICENSING
Central Region Field Office
1401 North 7th Street
Harrisburg, Pennsylvania 17102-1810

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July 16, 2010

Ms. Loriann Putzier, Executive Vice President
Tithonus Chambersburg, LP
6600 Brooktree Court, Suite 1000
Wexford, Pennsylvania 15090

RE: Magnolias of Chambersburg Building – I
735 Norland Avenue
Chambersburg, Pennsylvania 17201

Dear Ms. Putzier:

As a result of the Department of Public Welfare's licensing inspection on May 27, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in black ink that reads "Michele Strauser".

Michele Strauser
Regional Licensing Administrator

Enclosure
Violation Report

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Magnolias of Chambersburg – Building 1 735 Norland Avenue, Chambersburg, Pennsylvania 17201		CURRENT LICENSE NUMBER 307670	
INSPECTION DATE(S) (Include all dates of the inspection) May 27, 2010		REGIONAL REPRESENTATIVE Doug Hoover	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>RODNEY L. HANNAH DIRECTOR OF OPERATIONS</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Rodney L. Hannah</i>		DATE <i>06-22-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Michelle E. [Signature]</i>
			DATE <i>7/6/10</i>

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
16c The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow 15 (relating to abuse reporting covered by law).	Staff A received a 1-day suspension for a medication error that occurred on 3/1/10. Resident #1 did not receive his/her 1:00 PM dose of <i>Metformin</i> . This incident was not reported to the Department.	05/27/10 06/28/10 07/16/10	16C 1) As the missed dose of Metformin for resident # 1 occurred on 03/01/10, the DWP surveyor indicated that a retroactive report was not required. 2) An audit of the medication error log will be conducted by the Healthcare Compliance Coordinator for the past 90 days to identify additional unreported medication errors and if found take corrective measures. 3) Following a review of our medication error reporting system, it was determined that the new Director of Resident Care Services will assume responsibility to investigate, report and file any and all medication errors on the next working day.	

JUN 28 2010


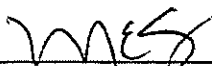
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		DATE 7/16/10

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141a-2 The medical evaluation shall include the following: (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.	Resident #2's medical evaluation, dated 5/25/10, refers to an attached medication administration record (MAR) for medications. There was no attachment and the medication section was blank except for the attachment reference. Repeated violation – 12/18/09	06/01/10 06/28/10	141 a-2 1) Resident #2's revised medication evaluation, listing current medications, was re-submitted to the resident's physician and signature/date obtained. 2) An audit will be conducted by the Healthcare Compliance Coordinator of current in-house residents medical evaluations. Should additional medical evaluations, lacking a physician's signature/date on the attached medication list be found, the medication evaluation will be revised to include the list medications and the physicians' signature/date obtained.	

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141a-2 The medical evaluation shall include the following: (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.	Resident #2's medical evaluation, dated 5/25/10, refers to an attached medication administration record (MAR) for medications. There was no attachment and the medication section was blank except for the attachment reference. Repeated violation – 12/18/09	07/16/10	5) The Director of Resident Care services will maintain a tickler system to review and maintain medical evaluations going forward for timely & proper completion. The Executive director will randomly audit the community medical evaluations monthly for compliance.	


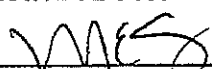
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188b A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.	On 3/1/10 resident #1 did not receive his/her 1:00 PM dose of Metformin . This medication error was not reported to the resident, the resident's designated person or the prescriber.	05/27/10 06/28/10 07/16/10	188b 1) As resident #1 was deceased at the time of survey, no follow up necessary at this time. 2) An audit of the medication error log will be conducted by the Healthcare Compliance Coordinator for the past 90 days to identify additional unreported medication errors and if found take corrective measures. 3) Following a review of our medication error reporting system, it was determined that the new Director of Resident Care Services will assume responsibility to investigate and notify appropriate family members and/or residents involved with future medications errors on the next working day.	



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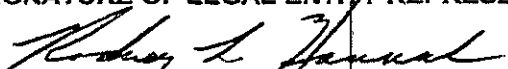

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202 The following procedures are prohibited: (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited.	Resident #2's record has a fax, dated 4/5/10, from the facility to the physician requesting a PRN (as needed) medication for agitation. The physician returned the fax with an order for 0.5 mg Lorazepam to be used for agitation, not to exceed 4 doses daily, on 4/5/10. The MAR for Resident #2 has an entry, dated 4/19/10, for Lorazepam (PRN) given at 1:00 AM for agitation. Resident #3 has a physician's change order, dated 5/7/10, for	06/01/10 06/28/10	202 1) Resident # 2 has been reassessed by his physician. Physician has clarified the order for Lorazapan to be given for anxiety. Resident # 3 was reassessed by her physician and the Haldol order was discontinued. 2) An audit will be conducted by the Healthcare Compliance Coordinator to identify additional occurrences where proper medical diagnoses are lacking and if found take corrective measures.	
		06/30/10	3) In reviewing our system, it appears the medication assistants were interchanging behavior symptoms and proper medical diagnosis during communication with physicians.	

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	<i>Haldol, 0.5 mg</i> , to be given every 6 hours if needed during the day for agitation. Before the order was changed, Resident #3 had a PRN order for <i>Haldol, 1 mg</i> , to be given every 6-8 hours. The MAR for April, 2010 has the diagnosis/purpose for the medication as "psychotic disorders." The MAR has an entry, dated 4/11/10, for <i>Haldol</i> as given at 7:30 AM for "behavior."	06/30/10 07/16/10	<p>4) The Director of Resident Care Services will conduct a mandatory in-service/training on June 30th to educate staff on the appropriate medical diagnosis which must accompany any request for medication and/or medication adjustment.</p> <p>5) The Director of Resident Care services will review Medication Administration Records prior to change over at the first of each month to monitor for appropriate medical diagnosis. The Executive director will randomly audit monthly for appropriate diagnosis as well.</p>	