



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

NOV 01 2012

Ms. Heidi A. Aguillo, RN, BSN, President
HFA, Inc.
Olivia Village
13771 South Eagle Valley Road
Tyrone, Pennsylvania 16686

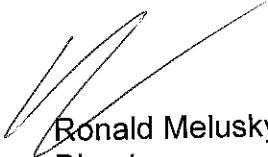
Dear Ms. Aguillo:

As a result of the Department of Public Welfare's (Department) licensing inspection on July 16, 2012 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 Human Services Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,



Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 31917 - 07/16/2012 - Minnich, Ron
 PCH Name: OLIVIA VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.93(a) - Each ramp, interior stairway and outside steps must have a well-secured handrail.

2a. DESCRIPTION OF VIOLATION
 The outside concrete landing adjoined to the exit by room #1 alternates from 2 inches to 4 inches above grade level. There is no handrail present.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Short Term Goals:

Re-grade then reseed the perimeter of the concrete landing to maintain a safe grade from/into its outside lawn. The property owner, Perpetual Care, LLC [REDACTED] has been notified to have this done.

Date of Completion: 10/12/2012

Long Term Goals:

The Administrator will make sure that all concrete landings around the facility will have the safe/proper grade from/into their respective peripheral lawns. When there is slight erosion around these landings, the Administrator will report to Perpetual Care, LLC to make the necessary repair.

Date of Completion: Ongoing process

Attachment: Before-image of the concrete landing. The after-image will be provided to DPW upon completion.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Heidi A. Aguillo RN, BSN*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>HEIDI A. AGUILLO / ADMINISTRATOR</i>	Date <i>10/2/2012</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>10/12/12</u> (Date)	Plan of correction implementation status as of <u>10/12/12</u> (Date)
The above plan of correction was approved by <u>NSC</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 31917 - 07/16/2012 - Minnich, Ron
 PCH Name: OLIVIA VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION

An box of "Idahoan red premium mashed potatoes" was opened and unsealed in the home's pantry.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Short Term goals:

1. Staff was made aware of the violation. Discussed the mandatory nature of storing any open food item to a closed sealed container.
2. Administrator provided sealed containers specified for storing open food items.

Long Term goals:

1. Poster was posted at the pantry for a reminder to all staff stating that any open container must be initialed, dated and sealed.
2. A memo of the violation and plan of correction was issued to all staff attention.

Attachments:

1. Picture of the pantry with the poster.
2. Picture of the potatoes in a sealed container.
3. Memo to all staff.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Heidi A. Aguillo AN, BSN

Printed Name and Title of Legal Entity Representative
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HEIDI A AGUILLO

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Violation Report: 31917 - 07/16/2012 - Minnich, Ron PCH Name: OLIVIA VILLAGE			
1. REGULATION 55 Pa. Code §2600 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.			
2a. DESCRIPTION OF VIOLATION During the fire drill conducted on February 9, 2012 at 12:30p.m. only 8 of the 9 residents evacuated.			
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.</i>			
Short term goals:			
<ol style="list-style-type: none"> 1. Resident's meeting was conducted 2/9/2012 emphasized on the importance of fire drills. 2. Administrator met with the resident who did not participate with the fire drill. Attached is the content of the meeting. Reviewed the Home Rules and importance of the fire drill with the resident. 3. A Reportable Incident was forwarded to DPW in regards to the fire drill. Pls. see attached Reportable Incident. A follow up call was made by the Administrator to DPW regarding the incident. 			
Long term goals:			
<ol style="list-style-type: none"> 1. Importance of fire drills is discussed in a resident's monthly meetings. 2. More fire drills will be conducted in a month. 3. Lap blankets and robes are made available for easy/fast covers during fire drills as needed. 			
Attachments:			
<ol style="list-style-type: none"> 1. Copy of resident's meeting 2/9/2012 2. Copy of administrator and resident meeting 2/9/2012 3. Copy of Reportable Incident 2/10/2012 			
Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Heidi A. Aquillo P.W., BSW</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) HEIDI A. AQUILLO / ADMINISTRATOR			Date 10/2/2012
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Violation Report: 31917 - 07/16/2012 - Minnich, Ron
 PCH Name: OLIVIA VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

Inspectors witnessed Direct Care Staff Person A initial 12pm medications for all residents prior to the actual administration.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Short term / Long term goals:

1. Administrator reviewed to Direct Care Staff Person A and all staff the three parts of administering medications. Emphasized on the third part, that is the documentation / recording or writing the initials are done at the time the medication is administered to the residents.
2. Administrator talked to the staff of putting a small dot on the grid of the MAR when pulling out medication from the bubble pack to remind staff for initials at the time the medication is administered.

Repeat Violation: No

Date(s) of Previous Violation(s):

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 (Required on EVERY Page)

Heidi A. Aguillo RN, BSN

Printed Name and Title of Legal Entity Representative
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HEIDI A. AGUILLO / ADMINISTRATOR

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Violation Report: 31917 - 07/16/2012 - Minnich, Ron
 PCH Name: OLIVIA VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION
 The home did not have the prescribed medication, Krill oil 500mg, available for resident #3 at the time of the inspection.
 The home did not have the prescribed PRN medication, Mucinex ER 600mg, available for resident #4 at the time of the inspection.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed

Short term goals:

1. The Krill oil 500 mg was available for resident #4. It is resident #4 who was out of the building at the time of inspection. Staff A slide MAR up as an indicator that it was not given because [redacted] did not come back at noon as [redacted] indicated [redacted] time to come back.
2. Mucinex ER 600 mg for Resident #3 is a PRN medication and has not been using it. A discontinue order was given by the doctor. Please see attached discontinue order.

Long term goals:

1. Administrator will review every month all PRN medications not in use and get discontinue orders from the doctor.
2. The evening staff that receives the monthly delivery of medications is responsible to check all PRN medications during turnover of batch every month. Check on the expiration dates and availability of the PRN medications as well as to request for refills as needed.

Attachment : D/C order of the Mucinex

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