



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]
MAILING DATE: October 7, 2013

Mr. Nathaniel D. Pace, Administrator
Morris-Pace Assisted Living, Inc.
Morris-Pace Personal Care
416 Reading Avenue
West Reading, Pennsylvania 19611

Dear Mr. Pace:

As a result of the Department of Public Welfare's (Department) licensing inspection on August 22, 2013 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) 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.

Sincerely,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure

Violation Report: 21590 - 08/22/2013 - Yellenic, Cindy

PCH Name: MORRIS PACE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION

On 8/22/2013, the file for Staff Person A, date of hire 7/5/2013, did not include a criminal background check.

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.

- 1) This regulation helps protecting the safety of my residents
- 2) I hired staff person "A" and forgot to run the criminal background check. It was my over-sight.
- 3) I should have gotten this CBAC started the day of training this way I would have had the needed documents when he was hired.
- 4) I ran the CBAC while inspectors were here and gave them a copy.
- 5) When training begins, run the CBAC to ensure that there isn't anything preventing the hiring of new staff.
- 6) The Adman will be responsible to make sure that this is done timely.

Repeat Violation: No	Date(s) of Previous Violation(s):	12/14/2012	
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Signature of Legal Entity Representative (Required on EVERY Page) *Nathaniel J. Pace*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nathaniel J. Pace* Date *9/10/13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>10-04-13</u> (Date)	Plan of correction implementation status as of <u>10-04-13</u> (Date)
The above plan of correction was approved by <u>QP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 21590 - 08/22/2013 - Yellenic, Cindy

PCH Name: MORRIS PACE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.183(f) - Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

2a. DESCRIPTION OF VIOLATION

Resident #1 is on Novo1g 10mg 100units to be given, according to sliding scale, one time a day. This resident is now being prescribed the Novo1g Pen, but the home has 2 vials of injectable Novolog. One vial was opened in 6/20/13 and according to the manufactures direction to be discarded if not used within 28 days of being opened.

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.

- 1) The regulation protects the health of our residents.
- 2) The unused, opened vials should have been discarded when he started using the pen.
- 3) I did not check the vials in his bag. I checked the pens he was using and didn't take the ~~time~~ vials he wasn't out and discarded the opened vial. It was my over-sight.
- 4) I removed the used vial and discarded it.
- 5) While I do my weekly med cart check, I will pull all Insulin for every one, opened or not, and check the dates.
- 6) I, as the Admin and the med cart check person will be responsible to make sure that this doesn't happen again.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Nathaniel Pace*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Nathaniel D. Pace* Date *9/10/13*

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(Date)

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(Date)

The above plan of correction was approved by *[Signature]*
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented