



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE:

JAN 15 2014

Mr. Alvin W. Allison Jr., President/CEO
Baptist Homes Society
489 Castle Shannon Boulevard
Pittsburgh, Pennsylvania 15234

RE: Providence Point
200 Adams Avenue
Pittsburgh, Pennsylvania 15243
441430

Dear Mr. Allison:

As a result of the Department of Public Welfare's (Department) licensing inspection on December 17, 2013 and December 23, 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 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,

A handwritten signature in black ink that reads "Jill Pezzino". The signature is fluid and cursive.

Jill Pezzino
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: PROVIDENCE POINT		License Number: 44143
Address: 200 ADAMS AVENUE, PITTSBURGH, PA 15243		County: Allegheny
Administrator: Kim Salvio		Region: WEST
Legal Entity Name: BAPTIST HOMES SOCIETY		
Legal Entity Address: 489 CASTLESHANNON BOULEVARD, PITTSBURGH, PA 15234		
Certificate(s) of Occupancy		
I-2 11/10/2009 Township of Scott	Other 06/09/2009 Township of Scott	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 105	Waking Staff: 79
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Incident		
On-Site Inspections Dates and Department Representatives On-Site		
12/17/2013: Williams, Jason; Perry, Carole 12/23/2013: Williams, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable		
12/23/2013: Williams, Jason		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 84 Number of Residents Served: 80 Secured Dementia Care Unit in Home: Yes Area: First floor Secured Dementia Unit Capacity, if Applicable: 20 Number of Residents Served in Secured Dementia Care Unit, if applicable: 19 Number of Current Hospice Residents: 5 Number of Hospice Residents in past year: 19	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 80 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 25 Have a Physical Disability: 5	

RECEIVED

Violation Report: 44143 - 12/17/2013 - Williams, Jason
 PCH Name: PROVIDENCE POINT

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

JAN 6 2014

**WEST REGION FIELD OFFICE
 Human Services Licensing**

2a. DESCRIPTION OF VIOLATION

Resident #1 is prescribed Exelon 4.6 mg/24 HR patch with an order which states "apply 1 patch topically once daily **remove old patch before applying new** (rotate sites)". On the morning of 12/12/13, Resident #1 was taken to the emergency room due to unresponsiveness. In the emergency room, hospital staff found 3 Exelon patches on resident #1. The patches had the dates of 12/4, 12/9 and 12/11 on them, indicating the dates they were put on. The home failed to follow the written orders to remove the patches dated 12/4 and 12/9 when applying the next day's patches.

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.

12-23-13 CURTIS LONG TERM CARE PHARMACY NOTIFIED [REDACTED] VIA EMAIL TO EXPAND THE BODY SITE SELECTION IN THE ELECTRONIC MEDICATION ADMINISTRATION RECORD TO DENOTE SPECIFIC LOCATION ON A RESIDENTS BODY WHERE PATCHES ARE BEING APPLIED. PRIOR TO THE INCIDENT, STAFF HAD ONLY R (RIGHT) OR L (LEFT) TO CHOOSE FROM. COMPLETED BY [REDACTED] PCHA.

12-26-13 TRAINING STARTED FOR ALL NURSES AND MEDICATION AIDS ON THE NEW DEVELOPMENT OF DOCUMENTATION OF SPECIFIC BODY SITE LOCATION IN OUR ELECTRIC MEDICATION ADMINISTRATION RECORD. TRAINING BY [REDACTED] PCHA; [REDACTED] RN SUPERVISOR, [REDACTED] MEDICATION AID/PERSONAL CARE COORDINATOR.

12-27-13 CURTIS LONG TERM CARE PHARMACY AUDITED ALL PERSONAL CARE AND MEMORY SUPPORT RESIDENTS TO DETERMINE WHICH RESIDENTS HAD ANY TYPE OF MEDICATION PATCH ORDERED. THIS AUDIT WAS COMPLETED ON 12-27-13 AND REPORTED TO [REDACTED] PCHA PROVIDENCE POINT. COMPLETED BY [REDACTED] CURTIS LONG TERM CARE PHARMACY.

12-27-13 UPON REVIEW OF AUDIT- ALL RESIDENTS ORDERS IN THE ELECTRONIC HEALTH RECORD EXAMINED BY [REDACTED] TO DETERMINE IF ORDER WRITTEN PROPERLY FOR MEDICATION TYPE. IF NOT, PHYSICIANS NOTIFIED AND ORDER OBTAINED TO BE WRITTEN CORRECTLY.

12-27-13 SEPARATE ORDER FOR REMOVAL OF PATCH ENTERED INTO QUICKMAR BY PHARMACY. [REDACTED] CURTIS LONG TERM CARE, [REDACTED] PCHA.

1-1-14 SCHEDULED NURSES MEETING ON 1-10-14 TO CONTINUE TO EDUCATE NURSES ON CORRECTLY WRITING ORDER FOR PATCHES ON PHYSICIAN ORDER SHEET AND TO WRITE SEPARATE ORDER FOR REMOVAL OF PATCH AT APPROPRIATE TIME IN ELECTRONIC MEDICATION RECORD. [REDACTED] PCHA.

1-1-14 ALL NEW STAFF AND NURSES WILL HAVE THIS TRAINING AS PART OF THEIR ORIENTATION PROCESS TO ENSURE CONTINUITY AND SAFE MEDICATION ADMINISTRATION. [REDACTED] RN SUPERVISOR, [REDACTED] MEDICATION AID/PERSONAL CARE COORDINATOR.

Repeat Violation: No	Date(s) of Previous Violation(s):	NA	NA	NA
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Signature of Legal Entity Representative (Required on EVERY Page) *Kim Salvio, PCHA (441430)*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kim Salvio, PCHA* Date *1-1-14*

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

The above plan of correction is approved as of 1-7-14
 (Date)

Plan of correction implementation status as of 1-7-14
 (Date)

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

The above plan of correction was approved by *MS*
 (Initials)