



pennsylvania

DEPARTMENT OF PUBLIC WELFARE

Sent via e-mail: [REDACTED]

MAILING DATE: April 30, 2014

Ms. Jean Bready, president
Evergreen Elder Care Inc.
1201 Museum Road
Reading, Pennsylvania 19611

RE: The Villa St. Elizabeth
License #205760

Dear Ms. Bready:

As a result of the Department of Public Welfare's licensing inspection on February 27, 2014 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.

Sincerely,

Anne Graziano
Anne Graziano

Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 20576 - 02/27/2014 - Novak, Ryan
 PCH Name: THE VILLA ST ELIZABETH

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

Department Representatives determined that on 2/14/14 at approximately 8:15am Administrator A, removed the medications prescribed for resident #1 and resident #2 and placed the medications in a cup designated for each resident. Administrator A then left the medication area and went to each of the resident's rooms and administered the medications. Administrator A then returned to the medication area and documented the medication administration for resident #1 and resident #2. Medication Administration staff are required to document administration of medications at the time the medication is administered.

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.

*to each individual
 and a...*

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

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Date

DENISE KASABA, Admin 4-10-14

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

The above plan of correction is approved as of 4-30-14
 (Date)

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

Plan of correction implementation status as of 4-30-14
 (Date)

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

The management of the facility respectfully submits that this citation is not appropriate for the following reasons:

1. The Description of Violation as presented on the previous page is incorrect. In her interview with the DPW surveyors, Administrator A clearly detailed the timeline of her performance of Medication Administration on the morning of 2/14/2014, which fulfills the compliance responsibility to regulation 2600.187(b). At approximately 8:15AM, Administrator A removed the medications prescribed for resident #1, placed them in a cup and went to the resident's room and administered the medications for resident #1. Administrator A then returned to the med cart and documented the medication administration for resident #1. In a similar manner, Administrator A then removed the medications prescribed for resident #2, placed them in a cup and went to the resident's room and administered the medications for resident #2. She then returned to the med cart and documented the medication administration for resident #2.
2. It is important to note that Administrator A has been a licensed Administrator for 6.5 years. Before becoming an Administrator, she has held the position of Assistant Administrator- Medication Administrator Manager for over 4 years. Prior to that period in her career, Administrator A administered medication for over 8 years as a Med-tech. Additionally, Administrator A has been a Train-the-Trainer for 3 years during her healthcare career. Administrator A has the full responsibility of compliance to the Pennsylvania state regulations for the entire facility. With her vast experience in medication administration, she actively demonstrates to her staff proper compliance procedures through her daily hands-on example of medication administration in accordance with the DPW regulations.
3. The inspectors came to the facility to investigate an alleged complaint. At the exit meeting, the inspectors advised the Administrator (same Administrator A) that their investigation clearly revealed that all facets of the allegations were unfounded. The inspector mentioned a concern about the timeliness of administering medications to the resident rooms, but clearly stated he was not citing a violation. Instead, he was going back to the regional office to discuss it with his superiors. When the Violation Report was received by the facility, the report reflected NO VIOLATIONS regarding the alleged complaint just as the inspectors attested at the exit meeting. However, the 200.187(b) regulation was cited with an incorrect description of the procedures used by the Administrator that morning. Apparently, the facility was violated because the inspector mis-heard the procedures for medication administration utilized by a twenty year experienced Administrator.
4. 2600.187(b) states that the information in 2600.187(a)(13 & 14) shall be recorded at the time the medication is administered. Administrator A fully complied with this regulation. In that particular zone of the facility, residents are administered their medication in a two-fold manner. Some residents come directly to the med cart, while others receive their medications at their dining room tables. As in any facility, there are times when a resident will not come to the cart or their dining room; instead, they will stay in their rooms. In these rare instances, the presiding med-tech will perform the medication administration as described in paragraph #1 above, which insures compliance to this regulation. These procedures are conducted in a secure, timely manner and ensure MAR accuracy as noted in the Primary Benefit of this regulation in the PCH Regulatory Compliance Guide.
5. Finally, it should be noted that timeliness factor of this regulation is not specific; nonetheless, the facility has committed itself to having its medication administrators promptly record the MARS entry after confirming the consumption of the residents' medications. In order to underscore that the recording of the MARS entry was in fact at the time of the medication administration, the following time increments are proffered. As stated earlier, in this zone, Administrator A administered medications residents, who came directly to the med cart, received their medications at their dining table or, in a limited amount of cases, stay in their room. The med cart in this zone is adjacent to the residents' dining room. Therefore, the average time increments from the administration of medications until the recording of the MARS entry would be summarized in the following. In the cases of residents receiving their medication at the med cart, the average time increment would be less than 10 seconds. Since the average human walking speed is 3.1 miles per hour, which is 4.55 feet per second, residents at the farthest tables of the dining room would be approximately 60 feet away from the med cart. The time increment for Administrator A after she administers medication to a resident at a far table in the dining room and walk back to the med cart and record the MARS entry would then be a little more than 15 seconds. On the morning of 2/14/2014, resident #1's room was approximately 89 feet from the med cart used by Administrator A. The time increment from the moment Administrator A confirmed resident #1 consumed her medications, then for her to walk back to the med cart would be less than 20 seconds of walking and just a few seconds to properly record the MARS entry. It is believed these time increments – all of which are under a minute – qualify for compliance to regulation 2600.187(b).

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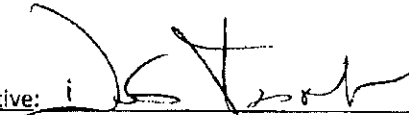
ES 4-30-14

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Adhering to Page 28 of the DPW Licensing Reference Manual (9-1-2013 edition) Can settings dispute a finding on the LIS? which states: "Settings may document disagreement with a finding, and/or may document that providing a plan does not constitute admission that the listed violation is accurate. However, settings must provide a plan to correct each violation in addition to any statement(s) disputing the report's findings", the facility is complying by presenting the following plan IN THE EVENT THE VIOLATION WERE TO OCCUR. The facility has disputed the findings noted on Section 2a by the DPW inspectors. Nonetheless, in the spirit of compliance with the LRM, the required plan is submitted below in the event a violation in this area were to occur sometime in the future:

1. Regulation 2600.187(b) is important because it ensures MAR accuracy by minimizing the chances of documentation mistakes if a resident refuses a medication. The facility has always been committed to insuring MAR accuracy and remains committed on-going.
2. In the event a violation of this regulation occurred, it would have been violated by a med-tech taking more than one residents' medications, placing them in cups and taking them to the residents to consume at the same time and then returning to the med cart and recording the multiple MAR entries.
3. The cause of this violation in the event it was to occur would be the lack of timely recording of a specific resident's medication administration activity.
4. To fix the violation right away, the Administrator would remove the med-tech from her med pass immediately.
5. To prevent future violation, all medication administration personnel have been re-covered with the facility's existing practice of administering medication to only one resident at a time followed by the immediate recording of the MAR entry for the particular resident. Please see attached Medication Administration bulletin.
6. The Administrator and Medications Manager will be continue to daily monitor all medication administration personnel performances through their weekly audits and quarterly training sessions to completely insure the prevention of any and all potential occurrences of late MAR entries or of administering to more than one resident at a time. The Administrator will continue to personally review all aspects of the facility's medication administration to insure complete compliance.

Signature of Legal Entity Representative:



DENISE KASABA
ADMIN

Print Name and Title of Legal Entity Representative :

Date: 4-10-14

09. 4-30-14