



JUL 17 2014

Ms. Leslie Roehrig, Administrator
Moravian Village of Bethlehem
526 Wood Street
Bethlehem, Pennsylvania 18018

RE: Moravian Village II of Bethlehem
License #: 215690

Dear Ms. Roehrig:

As a result of the Department of Public Welfare's licensing inspection on June 4, 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.

Your regular license for the period August 3, 2014 to August 3, 2015 was issued on May 9, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 21589 - 06/04/2014 - Yellanic, Cindy
 PCH Name: MORAVIAN VILLAGE II OF BETHLEHEM

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 prescribed an Advair diskus, which has a shelf life of 1 month after being opened per manufacturers orders. The resident's Advair was opened on 4/23/14, and was still in the medication cart as of 6/4/14.

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.

Please see the Attached P.O.C.

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
Leslie Roehrig			6/13/14
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of		Plan of correction implementation status as of	
6/17/14 (Date)		6/17/14 (Date)	
The above plan of correction was approved by		<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	
M (Initials)			



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Moravian Village II of Bethlehem

Violation Report Date: 6/4/14

License Number: 215691

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.

Za. DESCRIPTION OF VIOLATION

Resident #1 is prescribed an Advair diskus, which has a shelf life of 1 month after being opened per manufacturer's orders. The resident's Advair was opened on 4/23/14, and was still in the medication cart as of 6/4/14.

3. PLAN OF CORRECTION:

1. This regulation ensures that expired medications are not given to residents in order to protect resident safety.
2. Although a new medication had already been obtained, the expired medication had not been removed and discarded.
3. The violation occurred because the expired diskus was not discarded when the new replacement arrived.
4. The expired diskus was immediately removed and discarded, at the time it was identified (6/4/14)
5. Medications will continue to be dated when opened. Staff will be educated to remove and discard medications that are expired. This item will be added to the audit sheet to be audited on a regular basis. See attachment "A".
6. The Administrator or designee will be responsible for ensuring compliance with this regulation.

DM
6/17/14

Leslie Roehrig

Authorized Signature

6/13/14

Date

Violation Report: 21569 - 06/04/2014 - Yellenic, Cindy
PCH Name: MORAVIAN VILLAGE II OF BETHLEHEM

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

2a. DESCRIPTION OF VIOLATION
Resident #1 has a PRN order for Maalox Advanced Oral Suspension 20mg/5ml. The medication was not available.

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.

Please see the Attached P.O.C.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Leslie Roehrig*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Leslie Roehrig* Date *6/13/14*

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

The above plan of correction is approved as of <u>6/17/14</u> (Date)	Plan of correction implementation status as of <u>6/17/14</u> (Date)
The above plan of correction was approved by <u><i>M</i></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



Moravian Village II of Bethlehem

Violation Report Date: 6/4/14

License Number: 215691

1. REGULATION 55 Pa.Code §2600

2600.187(d)- The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #1 has a PRN order for Maalox Advanced Oral Suspension 20mg/5ml. The medication was not available.

3. PLAN OF CORRECTION:

- 1. This regulation ensures that the medications ordered by the physician are readily available for resident use.
- 2. The PRN medication was not present and available for resident use.
- 3. The violation occurred because when the expired medication was discarded, the new replacement was not obtained.
- 4. The medication was obtained by the pharmacy.
- 5. Staff will be educated to check the med cart to ensure that the medications ordered are available. This item will be added to the audit sheet to be audited on a regular basis. See attachment "A"
- 6. The Administrator or designee will be responsible for ensuring compliance with this regulation.

M
6/17/14

Leslie Roehrig

Authorized Signature

6/13/14

Date

Violation Report: 21589 - 06/04/2014 - Yellenic, Cindy
PCH Name: MORAVIAN VILLAGE II OF BETHLEHEM

1. REGULATION 55 Pa. Code §2600

2600.190(a) - A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Staff Person A, who is the Medication Administration Trainer for the facility, has no record of being observed by a practicum observer.

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.

Please see the Attached P.O.C.

W/D
m
6/17/14

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Leslie Roehrig*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Leslie Roehrig* Date *6/13/14*

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

The above plan of correction is approved as of _____
(Date)

Plan of correction implementation status as of _____
(Date)

The above plan of correction was approved by _____
(Initials)

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



Moravian Village II of Bethlehem

Violation Report Date: 6/4/14

License Number: 215691

1. REGULATION 55 Pa.Code §2600

2600. 190(a)- A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Staff Person A, who is the Medication Administration Trainer for the facility, has no record of being observed by a practicum observer.

3. PLAN OF CORRECTION (POC)

Spoke with Regional office – and per regional office supervisor- Staff Person A is a registered nurse, therefore no observations are required and this violation will be withdrawn. Attached is Staff Person A's RN License.

Leslie Roehrig

Authorized Signature

6/17/14

6/13/14

Date