



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]

MAILING DATE: June 18, 2015

Ms. Jean Bready, Owner
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 March 17, 2015 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 - 03/17/2015 - Dumas, Gerald
 PCH Name: THE VILLA ST. ELIZABETH

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

2a. DESCRIPTION OF VIOLATION

Resident # 2 is prescribed Olanzapine 5mg. take 1 tab by mouth daily at bedtime. On March 7 and 8, 2015, the medication was not available for the resident.

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.

See next page →

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Jean Bready*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) JEAN BREADY, RN OWNER	Date 4-23-15
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>4/24/15</u> (Date)	Plan of correction implementation status as of <u>4/24/15</u> (Date)
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- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

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

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1. Regulation 2600.187(a) is important because it ensures that residents receive medications and treatments as ordered by a physician.
2. It was violated by the delay in the re-filling of the resident's medication.
3. The cause of this violation was the breakdown in communications between the medication administration staff and the new pharmacy personnel:
 - a. On March 1, 2015, the facility transitioned to a new pharmacy in preparation for EMARS. As the medication for Resident #2 ran low, the medication administration manager faxed a renewal request to the PCP and pharmacy. The pharmacy neither filled the renewal request nor communicated with the PCP.
 - b. On the next day after the renewal request, the facility received its daily pharmacy shipment, and the staff person failed to discover that resident #2's medication was not present.
 - c. On March 7, the med-tech failed to escalate the lack of availability of Resident#2's medication.
4. The violation was fixed right away on March 8th by medications manager's quick action to escalate an expedited pharmacy delivery with the proper medication for Resident#2.
5. To prevent future violations related to this regulation, the Administrator immediately incorporated the following procedures and all staff have been covered:
 - a. All pharmacy orders initiated by the facility will be serialized in a binder to ensure the continuous chain of integrity;
 - b. All pharmacy deliveries will be logged in by the medications manager and cross-checked to the initial order forms.
 - c. Any discrepancies between the initial order and the shipping manifest will be documented, shared with the Administrator and immediately called to the pharmacy for corrective action.
 - d. The medications manger will then follow the process to completion – placement of the new medications in the cart.
 - e. Additionally, a positive report at each shift change will be required by all med-techs to detail any and all medication exceptions.
6. The Administrator, medications manager and med-techs will be responsible for preventing future violations by adhering to these procedures.

Adm or Designee will oversee periodic reviews of med cart(s) to insure ongoing compliance. CP.

4/24/15

Signature of Legal Entity Representative:

Jean Bready

Print Name and Title of Legal Entity Representative :

JEAN BREADY Date: 4-23-15

OWNER

Anna Graziano

4/24/15