



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 14 2015

Ms. Arlene E. Clark, NHA, Executive Director
Homewood at Martinsburg Inc.
437 Givler Drive
Martinsburg, Pennsylvania 16662

RE: Homewood at Martinsburg
License #: 360110


Dear Ms. Clark:

As a result of the Department of Human Services' licensing inspection on March 17, 2015 and March 18, 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.

Your regular license for the period June 3, 2015 to June 3, 2016 was issued on March 11, 2015. Your regular license remains in good standing.

Sincerely,


Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 36011 - 03/17/2015 - Rouse, McKinley
 PCH Name: HOMEWOOD AT MARTINSBURG

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A did not receive training in medication self-administration during the 2014 training year.

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 attached plan of correction. - PAGE 2-A

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Mandi Cottie, MSW, PCA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Mandi Cottie, MSW, PCA Services Director* Date *4-22-15*

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

The above plan of correction is approved as of *4/27/15*
 (Date)

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

Plan of correction implementation status as of *4/27/15*
 (Date)

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

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Plan of correction for violation #1: 2600.65(f) (1) Training topics for the annual training for direct care staff persons shall include medication self-administration training.

Our facility employs Licensed Practical Nurses (LPNs) who administer medications and assist those who require assistance to self-administer. Because the LPNs are solely responsible for this task and our facility does not permit Certified Nursing Assistants (CNAs) to handle or assist with medications, we misunderstood this regulation as it applies to all direct care staff regardless of whether or not they are permitted to assist with medications. We have taken immediate action to provide education to all direct care staff members regarding regulation 2600.65(f) (1) pertaining to medication self-administration training. The facility will incorporate this information into our annual training plan for all direct care staff. Documentation of this annual education will be maintained in each direct care staff member's education record.

OB

Violation Report: 36011 - 03/17/2015 - Rouse, McKinley
 PCH Name: HOMEWOOD AT MARTINSBURG

1. REGULATION 55 Pa.Code §2500

2600.236 - Each direct care staff person working in a secured dementia care unit shall have 6 hours of annual training related to dementia care and services, in addition to the 12 hours of annual training specified in § 2600.65 (relating to direct care staff person training and orientation).

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person B who worked in the Secure Dementia unit in 2014 only received 5 hours and 5 minutes of training related to dementia care and services in addition to the 12 hours of annual training specified in regulation 2600.65 (relating to direct care staff person training and orientation).

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 attached plan of correction. - Page 3-A

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Mandi Cottie, MSW, POA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Mandi Cottie, MSW, POA* *Assisted Lifestyle Services Director* Date *4-22-15*

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

The above plan of correction is approved as of <u>4/27/15</u> (Date)	Plan of correction implementation status as of <u>4/27/15</u> (Date) <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
The above plan of correction was approved by <u>CB</u> (Initials)	

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Plan of correction for violation #2: Staff not receiving required 6 hours of training related to dementia care and services.

Our facility will be offering six hours of annual dementia training to all direct care staff who work on both our secured dementia personal care unit as well as our non-secured personal care unit. This is in addition to the required 12 hours of annual training outlined in the RCG. The additional dementia trainings include three hours of classroom in-service pertaining to a variety of dementia-related topics and three additional units of Relias on-line training pertaining to dementia-related topics.

Previously, we had mistakenly included a few other required training topics with the three-hour dementia training in-service, thus running us short of the six hour requirement. To resolve this, those other required training topics will be covered as a separate in-service. Topics to be covered by this new in-service include instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation, and support plan; personal care service needs of the resident; care for residents with mental illness or mental retardation, or both, if the population is served in the home; and new population groups that are being served at the home that were not previously served, if applicable. Attendance for this new in-service will be tracked annually by the PCHA. We have updated our "annual job competency" tracking tool to reflect the new in-service (see attached). We anticipate the new in-service to be a 30 minute training, with time offered at the end for questions.

Mandi [Signature]