



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 20 2015

Ms. Karen Kehler, Sr. Executive Director
227 Evergreen Road Operations, LLC
227 Evergreen Road
Pottstown, Pennsylvania 19464

RE: Sanatoga Court
License #: 136140


Dear Ms. Kehler:

As a result of the Department of Human Services' licensing inspection on March 24, 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 20, 2015 to June 20, 2016 was issued on March 18, 2015. Your regular license remains in good standing.

Sincerely,


Matthew J. Jones
Director ^{13H}

Enclosure
License Inspection Summary

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

PCH Name: Sanaloga Court		License Number: 13614
Address: 227 Evergreen Road, Pottstown, PA 19464		County: Montgomery
Administrator: Earl Stingel		Region: SOUTHEAST
Legal Entity Name:		
Legal Entity Address: 227 EVERGREEN ROAD, POTTSTOWN, PA 19464		
Certificate(s) of Occupancy C-2 LP 03/10/1998 PA Dept. of Labor & Industry		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 95	Waking Staff: 71
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 03/24/2015: Kazimer, Lauren; McIlvain, Shawn		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 85 Number of Residents Served: 67 Secured Dementia Care Unit In Home: Yes Area: Homestead Secured Dementia Unit Capacity, if Applicable: 28 Number of Residents Served in Secured Dementia Care Unit, if applicable: 23 Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 4		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 65 Have Mental Illness: 2 Have an Intellectual Disability: 0 Have a Mobility Need: 28 Have a Physical Disability: 1

Violation Report: 13614 - 03/24/2015 - Kazlmer, Lauren
 PCH Name: Sanatoga Court

1. REGULATION 55 Pa.Code §2600
 2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION
 The contract for resident #1 was not signed by 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.

Our normal policy is if a resident refuses to sign we document our attempts to have them sign on the paperwork. Resident signature line was completed by P.O.A./son at the request of the resident. He signed the responsible party line as well. We have reviewed our contracts to ensure all other contracts are signed by the resident or documented that the resident chose not to or refused to sign. We have taken the suggestion of the surveyors and have begun including signature refusals as part of the resident's notes as well as documented on the contract itself. Administrator/designee will conduct audits to ensure ongoing compliance.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Holly Moylan*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Holly Moylan, Executive Director Date 05/07/2015

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

The above plan of correction is approved as of <u>5/11/15</u> (Date)	Plan of correction implementation status as of <u>5/12/15</u> (Date)
The above plan of correction was approved by <u><i>HM</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

Violation Report: 13614 - 03/24/2015 - Kazlmer, Lauren
 PCH Name: Sanatoga Court

1. REGULATION 85 Pa.Code §2600
 2600.41(e) - A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in § 2600.41(d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION
 Resident #1's record did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaint procedures.

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.

Our normal policy is if a resident refuses to sign, we document attempts on the paperwork. Resident signature line was completed by P.O.A./son at the request of the resident. He signed the responsible party line as well. We have reviewed our paperwork to ensure all other paperwork is signed by the resident or documented that the resident chose not to or refused to sign. We have taken the suggestions of the surveyors and have begun including signature refusals as part of the resident's notes as well as documented on the on the contract itself. Administrator/designee will conduct audits to ensure ongoing compliance.

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Violation Report: 13614 - 03/24/2016 - Kazlmer, Lauren
 PCH Name: Sanatoga Court

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION
 The bed in room 208 does not have a source of light that can be turned on/off from bedside.

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.

Corrected at the time of inspection Maintenance Director added a multiplug (picture attached). Alert and oriented resident had unplugged light to plug in another appliance in. Staff will continue to monitor all rooms daily for bedside lamp functionality. Administrator/designee will audit for ongoing compliance.

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Violation Report: 13614 - 03/24/2015 - Kazimer, Lauren
 PCH Name: Saratoga Court

1. REGULATION 55 Pa.Code §2800
 2800.183(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 #2's order for Neomycin Sulfate/Bacitracin was discontinued and was being stored in the medication cart on 3/24/2015.

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.

Item was removed in presence of surveyor. Staff inserviced at communication meeting on removing discontinued items when discharge order is received. Daily PM cart checks remain in place, weekly audits by RCD or designee. Education was given to all medication techs and LPNs.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Violation Report: 13614 - 03/24/2015 - Kazimor, Lauren
 PCH Name: Sanatoga Court

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
 On 3/7/2015 and 3/8/2015, resident #3 received a schedule dose of Busprone HCL 15mg at 8 PM. Staff did not initial the medication record at the time of administration.

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.

LPN was disciplined and reviewed expectations of completing a medication pass. Staff was also educated on the 3 checks and signing for medications as soon as they are given. Resident Care Director/Designee will conduct audits to ensure ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Holly Moylan, Executive Director

Date 05/07/2015

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Violation Report: 13614 - 03/24/2015 - Kazimer, Lauren
 PCH Name: Sanatoga Court

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

2a. DESCRIPTION OF VIOLATION
 Resident #2 has an order for Senna 8.6mg, take 1 tablet by mouth every other day. From 3/1/2015 to 3/14/2015 resident #2 received Senna 8.6mg everyday in error.

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.

Reviewed with staff during communication meetings. Reeducated staff on proper med pass policy including the 5 rights of medication administration and the three checks

Daily checks by LPN will be conducted to ensure all medications are administered in accordance with care MAP + prescription, starting 6/1/15.

BHSL Incident Reporting Form was sent in on 3/24/15 family and MD were updated on 3/24/15.

Resident Care Director/Designee will audit to ensure ongoing compliance.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	03/28/2014		
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Violation Report: 13614 - 03/24/2015 - Kazimer, Lauren
 PCH Name: Sanatoga Court

1. REGULATION 65 Pa.Code §2600
 2600.231(e) - Each resident record shall have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit.

2a. DESCRIPTION OF VIOLATION
 Resident #1 was admitted to the SDCU on 11/4/2014. The home has no documentation that the resident has not objected to the admission.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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