



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 30 2015

Ms. Gail A. Inderwies, President/Executive Director
Keystone Hospice
8765 Stenton Avenue
Wyndmoor, Pennsylvania 19038

RE: Keystone Hospice
License #: 127970

Dear Ms. Inderwies:

As a result of the Department of Human Services' licensing inspection on July 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.

Your regular license for the period June 11, 2015 to June 11, 2016 was issued on March 18, 2015. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 12797 - 07/17/2015 - McIlvain, Shawn
 PCH Name: KEYSTONE HOSPICE

1. REGULATION 55 Pa.Code §2600

2600.96(a) - The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

2a. DESCRIPTION OF VIOLATION

On July 17, 2015, the first aid kit on the second floor, nursing station, did not contain goggles/safety glasses.

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.

The item that was cited as missing from the first aid kit safety glasses, are routinely in the kit and are now in the first aid kit having been replaced on July 17, 2015.

The Clinical Supervisor for Keystone House nursing staff has assigned a staff RN to inventory the first aid kit weekly to assure it contains the correct contents. The assignment was made on July 23rd and the missing item was replaced immediately on the date of the survey on July 17, 2015.

The first aid kit will be inventoried each Thursday following the Thursday morning nursing and social worker team meeting. A sign off sheet has been implemented (see attached) and the Thursday day shift nurse assigned will sign the log sheet upon completion of the inventory. The log sheet will be kept at the 2nd Floor nurses station. The first aid kit will be secured with a plastic closure as well.

Staff has been re-trained on the importance of immediately replacing any items that may be used and removed from the first aid kit. (3 pages attached)

Repeat Violation: Yes

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)

Gail A. Inderwies, RN, BSN, President

Date 08/14/2015

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

The above plan of correction is approved as of

8/19/15
 (Date)

Plan of correction implementation status as of

8/19/15
 (Date)

The above plan of correction was approved by


 (Initials)

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