



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 25 2015

Mr. James Kusko, President
Sacred Heart Assisted Living, LLC
3910 Adler Place, Suite 100
Bethlehem, Pennsylvania 18017

RE: Sacred Heart Senior Living by the Creek
602 East 21st Street
Northampton, Pennsylvania 18067
License #: 201360

Dear Mr. Kusko:

As a result of the Department of Human Services' licensing inspection on July 21, 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 September 29, 2015 to September 29, 2016 was issued on June 10, 2015. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Matthew Jones".

Matthew J. Jones
Director

Enclosure
License Inspection Summary

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

PCH Name: SACRED HEART SENIOR LIVING BY THE CREEK		License Number: 20136
Address: 602 EAST 21ST STREET, NORTHAMPTON, PA 18067		County: Northampton
Administrator: Gayle Yastrop		Region: CENTRAL
Legal Entity Name: SACRED HEART ASSISTED LIVING LLC		
Legal Entity Address: 3910 ADLER PLACE SUITE 100, BETHLEHEM, PA 18017		
Certificate(s) of Occupancy		
C-1 09/16/1998 Borough of Northampton	C-2 LP 09/10/1998 Dept. of Labor & Industry	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 111	Waking Staff: 83
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 07/21/2015: Rushin, Julienne; Yellenic, Cindy		
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: 124 Number of Residents Served: 88 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 3 Number of Hospice Residents in past year: 5		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 88 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 23 Have a Physical Disability: 2

Violation Report: 20136 - 07/21/2016 - Rushin, Julianne
PCH Name: SACRED HEART SENIOR LIVING BY THE CREEK

1. REGULATION 55 Pa. Code §2600

2600.184(b) - If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

2a. DESCRIPTION OF VIOLATION

The first floor "treatment" medication cart contained the following over the counter items that were not labeled with the resident's name: 1 bottle of Specta-Vite multi-vitamins and 1 box of CVS brand Allergy Relief. Staff confirmed that the items belonged to resident # 1.

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.

Any medication received from pharmacy or family for VA residents will be labeled immediately upon receipt. Resident name and date will be placed on each medication, OTC or CAM.

Medication staff are aware of labeling procedures. Error occurred as current medication was not finished and the new supply was unopened.

Medication techs have been directed by DOW and Medication Trainer to label and date all medication, including new supply, as soon as medication is received.

Medication Shift Supervisors and Resident Care Director will ensure all medications are labeled by periodic/ weekly checks of all VA medication supply.

Administrator will receive confirmation from RCD and DOW, monitor, and ensure compliance that medications are labeled according to Regulation 184b.

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

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

The above plan of correction is approved as of 8/13/15 (Date)

Plan of correction implementation status as of 8/13/15 (Date)

The above plan of correction was approved by (Initials)

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

Violation Report: 20136 - 07/21/2015 - Rushin, Julianne
RCH Name: SACRED HEART SENIOR LIVING BY THE CREEK

1. REGULATION 55 Pa.Code §2600

2600.167(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy; If applicable.
- (11) Special precautions, If applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Review of the resident #2's glucometer indicates a reading of 184 on 4/11/15 (7/14/15) at 6:41 am. A blood sugar level of 157 was documented by staff.

The MAR for resident #4 indicates a physicians ordered to have his/her blood sugar level (BSL) tested 4 times daily. Staff improperly documented the following information on the resident's MAR:

- On 6/18/15 at 7:00am the resident's glucometer indicated a BSL of 109; a reading of 180 was documented.
- On 6/17/15 at 8:00am the resident's glucometer indicated a BSL of 237; a reading of 241 was documented.
- On 6/20/15 at 7:00am the resident's glucometer indicated a BSL of 53; a reading of 93 was documented.
- On 6/20/15 at 8:00pm the resident's glucometer indicated a BSL of 271; a reading of 211 was documented.
- On 6/21/15 at 7:00am the resident's glucometer indicated a BSL of 73; a reading of 70 was documented.

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.

Medication techs will immediately and accurately record blood sugar readings on the Daily log for each resident. Documentation of PRN blood sugars will also be recorded.

All Blood sugar results will be reviewed twice per week by the Director of Wellness and RCD. Results recorded in glucometer will be compared to the results listed in daily log. Any discrepancy will be investigated. Meter calibration will be implemented to ensure accurate results.

* RCD and DOW will ensure glucose recording procedures are followed. Any discrepancies in recording will be reviewed with Med Tech, further instruction will be implemented and recorded. Administrator will monitor and ensure compliance with

Repeat Violation: no	Regulation 187a.	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative: Julianne Rushin, General Practice Assoc Date 8-10-15
(Required on EVERY Page) LP Member Sacred Heart Assisted Living LLC

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The above plan of correction is approved as of <u>8/13/15</u> (Date)	Plan of correction implementation status as of <u>8/13/15</u> (Date)
The above plan of correction was approved by <u>[Signature]</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: 20138 - 07/21/2015 - Rushin, Julianne
PCH Name: SACRED HEART SENIOR LIVING BY THE CREEK

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

2a. DESCRIPTION OF VIOLATION

The medication administration record for resident # 2 indicates they are to have their blood sugar level tested 3 times daily (7:30am, 11:30am, 4:30pm). Review of the resident's glucometer indicates they were not tested on 4/12/15 (7/15/15) at 4:30pm.

The medication administration record for resident # 3 indicates they are to have their blood sugar level tested on Mondays and Fridays before breakfast. Review of the resident's glucometer indicates they were not tested on 7/20/15.

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.

Blood sugar readings for resident #2 and resident #3 were not written in daily glucose log according to policy and procedure. Error due to failure to record results on log.

Medication techs involved in error were counseled and retrained by the Medication Trainer on the procedures to follow for proper documentation of blood sugar readings.

All Blood sugar results will be reviewed twice per week by the Director of Wellness and RCD. Results recorded in glucometer will be compared to the results listed in daily log. Any discrepancy will be investigated. Meter calibration will be implemented to ensure accurate results.

RCD and DOW will ensure glucose recording procedures are followed. Any discrepancies in recording will be reviewed with Med Tech, further instruction will be implemented and recorded.

• Administrator will monitor and ensure compliance with Regulation 187d.

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 Date
James Rusk General Partner 8-10-2015
Northampton Personal Care Assoc. V.P. Member
Sacred Heart Assisted Living LLC

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