



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 30 2016

Ms. Linda Kanarr, CEO
St. Mary's Villa Nursing Home
516 St. Mary's Villa Road
Elmhurst Township, Pennsylvania 18444

RE: St. Mary's Villa Residence
One Pioneer Place
Moscow, Pennsylvania 18444
License #: 203900

Dear Ms. Kanarr:

As a result of the Department of Human Services' annual licensing inspection on December 10, 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,

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 20390 - 12/10/2015 - Yellenic, Cindy
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
 On December 7, 2015, Resident #1's glucometer did not have any readings listed in the history, but had a blood glucose #352 recorded in the MAR. The resident's blood glucose test was administered with Resident #2's glucometer.

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.

All staff that administer medication were educated on importance of not sharing accucheck machines. Each resident needs to have their own machine. Back up machines and strips for each resident were purchased through McKesson. The machines were labeled with each residents name, in the event a resident runs out of strips or has a machine malfunction, another machine will be readily available. Nursing Supervisor or designee will monitor the accucheck machines weekly x 4 weeks to ensure 100% compliance and then random audits will be performed.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Koryn Gallagher*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Koryn Gallagher, PEHA* Date *12-23-15*

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

The above plan of correction is approved as of <u>1/7/16</u> (Date)	Plan of correction implementation status as of <u>1/7/16</u> (Date)
The above plan of correction was approved by <u><i>cm</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: 20390 - 12/10/2015 - Yellenic, Cindy
 PCH Name: ST MARY S VILLA RESIDENCE

1. REGULATION 65 Pa.Code §2600

2600.187(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 na'a (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Resident #1 has a physician's order to have a blood glucose test (BG) administered 3 x day. On 12-6-15, the resident's BG#94 and was recorded in the MAR as 98.

Resident #3 has a physician's order to have a blood glucose test (BG) administered once a week. On 12-1-15, the resident's BG#102 was recorded in the MAR as 112.

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.

All staff that administer medications to residents were educated on the importance of recording the correct blood glucose result in to the MAR. Nursing Supervisor or designee will audit the accucheck machines weekly x 4 weeks to ensure 100% compliance and then random audits will be performed.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Monica Gallagher, PCA* Date *12-23-15*

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

The above plan of correction is approved as of 11/7/16
 (Date)

Plan of correction implementation status as of 11/7/16
 (Date)

The above plan of correction was approved by M
 (Initials)

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

Violation Report: 20390 - 12/10/2015 - Yellenic, Cindy
 PCH Name: ST MARY'S VILLA RESIDENCE

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

2a. DESCRIPTION OF VIOLATION

Resident #1 has a physician's order to have a blood glucose test (BG) administered 3 x day. On 12-7-15, the resident's glucometer did not have any readings for that day in their glucometer because the resident was out of the BG strips.

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.

All staff that administer medications to residents were educated on importance of following the directions of the prescriber. Back up accucheck machines and strips were purchased for each resident to ensure if they run out of strips or have a machine malfunction, another machine will be readily available. Nursing Supervisor or designee will monitor accucheck machines on a weekly basis to ensure ongoing compliance.

The administrator shall monitor and assure that the home is following the direction of the prescriber.
 The administrator is responsible for ongoing compliance.
 M 1/7/16

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Koryn Gallagher

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Koryn Gallagher

Date 12-23-15

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The above plan of correction is approved as of

1/7/16
 (Date)

Plan of correction implementation status as of

1/7/16
 (Date)

The above plan of correction was approved by

M
 (Initials)

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