



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 23 2016

Ms. Karen Kehler, Senior Executive Director
450 East Philadelphia Avenue Operations LLC
450 East Philadelphia Avenue
Shillington, Pennsylvania 19607

RE: Mifflin Court
License #: 222060

Dear Ms. Kehler:

As a result of the Department of Human Services' annual licensing inspection on February 11, 2016 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,

A handwritten signature in black ink, appearing to read "Jay Bausch".

Jay Bausch
Deputy Secretary

Enclosure
License Inspection Summary

Violation Report: 22206 - 02/11/2016 - Dumas, Gerald
 PCH Name: MIFFLIN COURT

1. REGULATION 55 Pa. Code §2600
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION
 The lint trap of the GE Dryer, located on the third floor of the home, contained lint at 2:05 p.m.

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.

A sign will be posted by 3/18/16 at all dryers to remind residents to remove lint after each use. Ongoing, Housekeeping staff will check dryers throughout the day to ensure cleanliness and safety.

Admin Designee will do periodic walk throughs of the building to ensure ongoing compliance. 4-22-16

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

Signature of Legal Entity Representative (Required on EVERY Page) *Lee Durnal*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Date
 LEE DURNAL EXECUTIVE DIRECTOR 3/14/16

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

The above plan of correction is approved as of 4-22-16
 (Date)

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

Plan of correction implementation status as of 4-22-16
 (Date)

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

Violation Report: 22206 - 02/11/2016 - Dumas, Gerald
 PCH Name: MIFFLIN COURT

1. REGULATION 55 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 nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record (M.A.R.) for resident #1's blood glucose check was recorded on 1/8/16 as 117 however, resident #1's glucometer indicated that a blood glucose check for this day and time was not conducted.

On 1/22/16 resident # 1's blood glucose was recorded in the M.A.R as 112 however, resident # 1's glucometer indicated that a blood glucose check for this day and time was not conducted.

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 who use glucometers will be inserviced by 3/18/16 on proper use of the glucometer, and recording result on MAR. The Resident Care Director or designee will do weekly glucometer checks to monitor for compliance.

Adm will perform periodic reviews to ensure ongoing compliance @ 4/22/16

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Lee Dwinal*

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

LEE DWINAL EXECUTIVE DIRECTOR 3/11/16

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Violation Report: 22206 - 02/11/2016 - Dumas, Gerald
 PCH Name: MIFFLIN COURT

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

2a. DESCRIPTION OF VIOLATION

Resident # 1's M.A.R. indicated that, " Chemsticks weekly on Friday and record."
 Resident # 1's glucometer indicated the on the following days and times a blood glucose (glucometer) check was not conducted as per the prescribers orders:

Friday 1/8/16 at 6:30 a.m.
 Friday 1/22/16 at 6:30 a.m.

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 performing chemsticks will be inserviced by 3/18/16 on proper use of the glucometer and the recording of blood sugars according to the physician's orders. The Resident Care Director or designee will conduct weekly glucometer and MAR checks to monitor compliance.

Adm will perform periodic reviews to ensure ongoing compliance. Cp. 4/22/16

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) *LEE DWYAN - EXECUTIVE DIRECTOR* Date: *3/14/16*

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Violation Report: 22206 - 02/11/2016 - Dumas, Gerald
 PCH Name: MIFFLIN COURT

1. REGULATION 55 Pa.Code §2600
 2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION

Whiteout was used in the upper signature portion of staff persons A's annual practicum.

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 person responsible for the whiteout is not employed at the facility anymore. The RCD is responsible for conducting the annual practicum, and will not be using whiteout on any the staffs' annual training, or any other form.

Adm / Designee will perform periodic audits to ensure ongoing compliance. [Signature] 4/22/16

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *LIFE DWINAL - EXECUTIVE DIRECTOR* Date *3/14/16*

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