



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUN 24 2016

Mr. Michael A. Palermo, Administrator
Vive Bene, Inc.
801 Market Street
Williamsport, Pennsylvania 17701

RE: Tilburg's Home for the Young at Heart
License #: 218390

Dear Mr. Palermo:

As a result of the Department of Human Services' licensing inspection on March 2, 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Jay Bausch".

Jay Bausch
Deputy Secretary

Enclosures
License
License Inspection Summary

Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600
 2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION
 The current inspection certificate for the home's boiler, expired 2/28/16.

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.

① This regulation is to ensure that all applicable laws, ordinances and regulations are followed.

② The current inspection certificate for the home's boiler had expired three days before inspection.

③ The current inspection certificate for the home's boiler had expired three days before inspection.

④ A call was made to the boiler inspector, who arrived within the week. The boiler was inspected on March 4, 2016, and was passed inspection.

⑤ An appointment will be made for a boiler inspection before the certificate expires.

⑥ The administrator will make an appointment with the boiler inspector within two weeks before the new certificate expires.

• The administrator shall be responsible for ongoing compliance. M 4/18/16

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *MICHAEL A. PALERMO - ADM.* Date *04-7-16*

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

The above plan of correction is approved as of 4/18/16
 (Date)

Plan of correction implementation status as of 4/18/16
 (Date)

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

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

Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.58(a) - If a home serves 16 or more residents, all direct care staff persons on duty in the home shall be awake at all times one or more residents are present in the home.

2a. DESCRIPTION OF VIOLATION

The home does not have an overnight awake staff person identified on their weekly work schedules. The home has staff person "A" who resides, lives at in the facility over night. As of 12-18-16 the home has 16 residents and requires an awake staff person overnight.

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.

① This regulation ensures that the home shall have a direct care staff person on duty in the home who will be awake at all times one or more residents are present in the home.

② Staff person A is the awake staff person. There is no violation.

③ Staff person A is the awake staff person. There is no violation.

④ A change will be made on the weekly work schedule to clearly identify that Staff Person A is the awake direct care staff person on duty.

⑤ The change in the work schedule will identify the awake staff person.

⑥ The administrator will verify the weekly work schedule to ensure that there is an awake staff person on duty.

-copy of schedule

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) M. A. Palermo

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) MICHAEL A. PALERMO-ADM. Date 04-07-16

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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.85(e) - Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION

At 9:00 AM on 03-02-16 the home's exterior dumpster was overflowing with trash and garbage. The dumpster lid was up and opened allowing for the penetration of insects and rodents.

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.

- ① This regulation is to ensure that trash is kept covered to prevent insect and rodent infestation
- ② Trash was piled inside the dumpster, to overflowing and prevented the lid to close, because a resident left the sink running, which damaged the hardwood floor in a room.
- ③ Ongoing repairs provided additional garbage causing an overflow situation.
- ④ A call was made to the garbage man to pick up the garbage.
- ⑤ A call will be made to the garbage man when there is an overflow situation.
- ⑥ The administrator will ensure the call is made if an overflow situation occurs.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *MICHAEL A. PALERMO ADM.* Date *04-07-16*

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- Not Implemented

Violation Report: 21839 - 03/02/2016 - OHaire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

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
 Two bedside lamps belonging to residents #1 and #2 were inoperable.

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.

- ① This regulation is to ensure that an operable lamp or other source of lighting that can be turned on at the bedside.
 - ② The lighting at the bedside of residents #1 and #2 was inoperable.
 - ③ The lighting at the bedside of two residents was inoperable.
 - ④ The lights were replaced at the time of inspection.
 - ⑤ All lights will be checked daily to ensure that all are operable.
 - ⑥ The housekeeper will turn on each light daily to ensure that all lighting is operable.
- The administrator shall monitor and assure ongoing compliance. *Ms 4/18/16*

Repeat Violation: Yes Date(s) of Previous Violation(s) 07/30/2015

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *ADM*
MICHAEL A. PALERMO Date *04-07-16*

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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2a. DESCRIPTION OF VIOLATION

The home did not update their local fire department regarding their change in the mobility needs of their residents. The home no longer had any residents with mobility needs since 01-3013 and local fire department was never notified of this change.

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.

- ① This regulation is to ensure that the local fire department is aware of any resident with mobility needs who may need assistance in an emergency.
- ② The fire department was not informed of a census change.
- ③ The fire department was not informed of a census change.
- ④ An email was sent at the time of inspection to the local fire department informing them of census change. A reply was received in the mail.
- ⑤ An email will be sent at the time of any census change and a request for a mailed response will be requested.
- ⑥ The administrator will ensure that the fire department is notified of any change in census. -copy of letter

Repeat Violation: Yes Date(s) of Previous Violation(s): 03/30/2016 - 7

Signature of Legal Entity Representative (Required on EVERY Page) *M.A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *MICHAEL A. PALERMO-Adm.* Date *04-07-16*

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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

On 12/15/15 an overnight fire drill was conducted at 12:00AM with 2 staff persons documented as participating during the fire drill. The home does not schedule 2 staff persons during the overnight schedule.

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.

- ① This regulation is to ensure that fire drills are held on different days of the week, at different times of day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.
- ② An overnight fire drill was held and 2 staff persons were documented as participating during the fire drill.
- ③ Two staff persons were documented as participating during the fire drill.
- ④ A change will be made to the documentation of fire drills to include a column for "staff observing."
- ⑤ The change to the documentation of fire drills will ensure that staff participating and staff observing are kept separate.
- ⑥ The administrator or staff person conducting the fire drill will be responsible for filling out the form monthly.

-copy of new fire drill form.

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

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *MICHAEL A. PALERMO* Date *04-07-16*

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Violation Report: 21839 - 03/02/2016 - OHaire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.141(a)(1) - A resident shall have a medical evaluation by a physician, physician's assistant, or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

2a. DESCRIPTION OF VIOLATION

The initial medical evaluation for resident #3, admitted to the home [redacted] 15, was not completed.

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.

- ① This regulation is to ensure that each resident shall be evaluated by a medical professional and documentation will be kept.
- ② The initial medical evaluation for resident # 3 was not completed.
- ③ The initial medical evaluation for resident # 3 was not completed.
- ④ a search of records was initiated after inspection and the medical evaluation for resident # 3 was found in another residents file.
- ⑤ Each new resident will be required to obtain a medical evaluation before entering the home.
- ⑥ The administrator will ensure that each new resident receives the correct forms to take to their physician to ensure that medical evaluations are completed.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) MICHAEL A. PALERMO-ADM. Date 04-07-16

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Violation Report: 21839 - 03/02/2016 - OHaire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION
 The annual D.M.E for Resident #1, (Admitted [redacted] 93), was not completed in 2014.

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.

- ① This regulation is to ensure that each resident shall be evaluated by a medical professional and documentation will be kept.
- ② The annual DME for resident #1 for 2014 was not completed.
- ③ The annual DME for resident #1 for 2014 was not completed.
- ④ A search of record was initiated after inspection and the 2014 DME for resident #1 was found in Resident #1's storage file.
- ⑤ Each resident's file will consist of the last 3 years of DME's including the most current DME.
- ⑥ The manager will ensure that all required DME's are kept in resident's file. The administrator will review each file to verify that all required DME's are present.

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

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) **MICHAEL A. PALERMO - Admin** Date **04-07-16**

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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- (4) A staff person who has completed the medication administration training as specified in § 2600.190 for the administration of oral; topical; eye, nose and ear drop prescription medications; Insulin injections and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Staff person "B"s Annual Medication Administration Training was not current. June 3, 2014 was the most recent date for Staff Person "B"s two annual medication administration observations.

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.

- ① This regulation is to ensure that any staff person is correctly trained and supervised to administer medications.
- ② Staff Person B's annual medication training was not current.
- ③ Staff Person B's annual medication training was not current.
- ④ Staff Person B will be retained in medication administration training.
- ⑤ Any staff person who may be required to administer medications will undergo medication administration training as they are hired.
- ⑥ The medication administration trainer will ensure that each staff person's medication training is kept current. The medication administration trainer and practicum observer will perform practicum observations on a quarterly basis.

The administrator shall monitor and assure ongoing compliance.

Repeat Violation: No Date(s) of Previous Violation(s): 05/14/2015

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo* 4/18/16

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *MICHAEL A. PALERMO - ADM.* Date *04-07-16*

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Plan of correction implementation status as of 4/18/16 (Date)

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

Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600
 2600.184(c) - Sample prescription medications shall have written instructions from the prescriber that include the components specified in § 2600.184(a)

2a. DESCRIPTION OF VIOLATION
 Resident #3 began to receive sample medication for Bystolic 5 mg tabs., to be taken by mouth at bed time on 02-09-16 for hypertension. The medication did not have a physician's prescription or pharmacy label for the medication.

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.

- ① This regulation is to ensure that sample medication is correctly identified as to the resident it is for and how and when the medication is to be taken.
 - ② There were no written instructions from the prescriber.
 - ③ There were no written instructions from the prescriber.
 - ④ A request was made to the prescriber for written instructions.
 - ⑤ Any sample medications will be required to be accompanied by written instructions by the prescriber.
 - ⑥ The manager will verify all sample medications and written instructions before administration of any such medication will be permitted.
- The administrator shall monitor and assure ongoing compliance
- M 4/18/16

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

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *MICHAEL A. PALERMO - ADM.* Date *04-07-16*

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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

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

Resident # 4's following medications were not initialed as being given on 03-02-16 at 8:00am at 1:30 pm.
 Ferrex -150 cap to be take by mouth, 1 cap. daily at 8:00AM.
 Olanzapine 15 mg tab to taken by mouth, 1 tab at 8:00AM.
 Omeprazole Dr. 20 mg cap take 1 cap by mouth at 8:00AM.
 Oyster Shell 500 mg tab. to be taken by mouth 1 tab at 8:00AM.

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.

- ① This regulation is to ensure that medication is recorded when administered.
- ② The medication administration was not recorded at time of administration.
- ③ The medication administration was not recorded at the time of administration.
- ④ Staff persons will be instructed that, except for emergencies, medications administration is a priority and must be totally completed.
- ⑤ Staff persons will be instructed that, except for emergencies, medications administration is a priority and must be totally completed.
- ⑥ The medication administration training will educate all staff persons that medications administration is a priority and must be totally completed.

Repeat Violation: Yes Date(s) of Previous Violation(s): 07/30/2015 • The administrator shall

Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo* He responsible for ongoing compliance. m 4/18/16

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) MICHAEL A. PALERMO - Adm. Date 04-07-16

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

Plan of correction implementation status as of 5/5/16
 (Date)

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- Not Implemented

Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

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

2a. DESCRIPTION OF VIOLATION
 Resident #5 's Clonazepam 0.5 mg tab.to be taken 2 times a day was not on hand and they did not receive their 1:00 pm dose on 03-02-16.

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.

- ① This regulation is to ensure that the home follows the instructions of the prescriber.
- ② Medications was not on hand as prescribed.
- ③ Medication was not on hand as prescribed.
- ④ Calls were made to the pharmacy and the prescriber to immediately correct the situation
- ⑤ Medication needing refilled will be reordered at least 7 days before the refill is needed.
- ⑥ The manager will make weekly checks to ensure medications are refilled in a timely manner.

• The administrator shall monitor and assure ongoing compliance *M* 4/18/16

Repeat Violation: Yes	Date(s) of Previous Violation(s)	07/30/2015	05/14/2015
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Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) MICHAEL A. PALERMO	Date 04-07-16
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Violation Report: 21839 - 03/02/2016 - O'Haire, Anne
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600

2600.221(a) - The administrator shall develop a program of activities designed to promote each resident's active involvement with other residents, the resident's family and the community.

2a. DESCRIPTION OF VIOLATION

Several residents that, although there is a posted activities calendar in the home, the home does not conduct any activities.

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.

- ① This regulation is to ensure that each resident can have an active involvement with other residents, their family and the community.
 - ② The residents don't participate in scheduled activities
 - ③ The residents don't wish to participate in scheduled activities.
 - ④ The only activities that seems to interest the residents are Bingo and some card games -
 - ⑤ Staff will hold daily games alternating between bingo and card games.
 - ⑥ Staff on duty will attempt to interest residents in daily activities.
- The administrator shall monitor and assure ongoing compliance - M 4/18/16

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) MICHAEL A. PALERMO - ADM.	Date 04-07-16
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>4/18/16</u> (Date)	Plan of correction implementation status as of <u>4/18/16</u> (Date)
The above plan of correction was approved by <u><i>M</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>cy</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented