



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

SEP 14 2016

Mr. Kenneth D. Hook, Administrator  
National Health Management, Inc.  
4415 Fifth Avenue  
Pittsburgh, Pennsylvania 15213

RE: Independence Court of Quakertown  
1660 Park Avenue  
Quakertown, Pennsylvania 18951  
License #: 127030

Dear Mr. Hook:

As a result of the Department of Human Services' annual licensing inspection on June 20, 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 "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 12703 - 06/20/2016 - Colon, Lissette	
PCH Name: INDEPENDENCE COURT OF QUAKERTOWN	
1, REGULATION 65 Pa.Code §2600 2600.85(a) - Sanitary conditions shall be maintained.	
2a. DESCRIPTION OF VIOLATION On 6/11/16, at 4:00pm, resident # 1's glucose level was checked with resident # 2's glucometer. On 6/12/16, at 4:00pm, resident # 1's glucose level was checked with resident # 3's glucometer.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i>	
<p>Staff person involved on 6/11 and 6/12 was counseled in reference of single resident use of glucometers. All nursing staff and medication assistants will be re-trained on glucometer usage for sanitary reasons. (Meeting scheduled for 7/28)</p> <p>* Please note all glucometers replaced 6/20 for usage starting 6/21</p> <p>* Also new policy in place effective 6/22 for individual glucometers kept/stored in resident's room</p>	
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) Patricia Holland Director Date 7/19/16	
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
The above plan of correction is approved as of <u>8/3/16</u> (Date)	Plan of correction implementation status as of <u>8/3/16</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: 12703 - 06/20/2016 - Colon, Lisselle  
 PCH Name: INDEPENDENCE COURT OF QUAKERTOWN

1. REGULATION 65 Pa.Code §2600  
 2600.103(f) - Outdated or spoiled food or dented cans may not be used,

2a. DESCRIPTION OF VIOLATION  
 There was a large dented can of black beans on the pantry shelf.

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.

Food Service Director or Designer will place dented cans in a storage bin marked "Dented Cans." These cans will be returned to supplier at time of receiving or when noted. All kitchen staff will be trained on inability to use dented cans and storage bin use. (meeting scheduled 7/28/16)

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)

Patricia Howland Dir. of Res Care

Date

7/19/16

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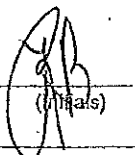
The above plan of correction is approved as of

8/3/16  
 (Date)

Plan of correction implementation status as of

8/3/16  
 (Date)

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(Initials)

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

Violation Report: 12703 - 06/20/2016 - Colon, Lissette  
 PCH Name: INDEPENDENCE COURT OF QUAKERTOWN

1. REGULATION 65 Pa.Code §2600  
 2600.182(c) - Medication administration includes the following activities, based on the needs of the resident:  
 (1) Identify the correct resident.  
 (2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.  
 (3) Remove the medication from the original container.  
 (4) Crush or split the medication as ordered by the prescriber.  
 (5) Place the medication in a medication cup or other appropriate container, or in the resident's hand.  
 (6) Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in § 2600.182(b)(4).  
 (7) Complete documentation in accordance with § 2600.187 (relating to medication records).

2a. DESCRIPTION OF VIOLATION

On 6/8/16 at 4:00pm, the home staff failed to document the medication administration record based on the glucometer readings for resident # 1. The glucometer reading was 154, and the medication administration record was 135.

On the following dates, the home staff failed to document the medication administration record based on the glucometer readings for resident # 2:  
 - 6/11/16 at 4:00pm, glucometer reading 254, medication administration record 246  
 - 6/16/16 at 4:00pm, glucometer reading 253, medication administration record 235  
 - 6/17/16 at 4:00pm, glucometer reading 129, medication administration record 126

On the following dates, the home staff failed to document the medication administration record based on the glucometer readings for resident # 4:  
 - 6/02/16 at 11:20am, glucometer reading 198, medication administration record 191  
 - 6/02/16 at 4:22pm, glucometer reading 184, medication administration record 196  
 - 6/02/16 at 9:59pm, glucometer reading 231, medication administration record 241  
 - 6/03/16 at 4:47pm, glucometer reading 279, medication administration record 267  
 - 6/06/16 at 9:16pm, glucometer reading 184, medication administration record 189  
 - 6/10/16 at 4:33pm, glucometer reading 166, medication administration record 157  
 - 6/10/16 at 10:16pm, glucometer reading 270, medication administration record 280  
 - 6/20/16 at 11:58am, glucometer reading 230, medication administration record 237

On the following dates resident # 4 had additional readings which were not documented on the medication administration record:  
 - 6/12/16, at 4:45pm - glucometer reading 834  
 - 6/14/16, at 11:58 am - glucometer readings 182 and 221

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
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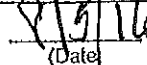

See attached


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) Patricia Honlan Dir of Res Care      Date 7/19/16

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The above plan of correction is approved as of  (Date)      Plan of correction implementation status as of  (Date)

The above plan of correction was approved by  (Initials)

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

## Plan of Correction Reg 2600.182

Nursing Staff and Medication Assistants will be re-trained in completing documentation of glucometer readings and entering on E-Mar, by the Dir of Res Care or Designee. (Meeting 7/28/12)

We also have a new policy for storing Accu Check machines in each applicable residents room.

We are adding an extra step to verify documentation entries and possible loss of readings prior to the end of each shift.

This will be completed by the med giver to assure reading and documentation are accurate and reflect the correct information. The staff persons responsible for incorrect information on dates 6/2, 6/3, 6/10, 6/12 & 6/20 are no longer employed @ JCC.

The other three staff involved have been counseled on importance of documentation.

Violation Report: 12703 - 06/20/2016 - Colon, Lissette  
PCH Name: INDEPENDENCE COURT OF QUAKERTOWN

1. REGULATION 55 Pa. Code §2600  
2600.107(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

On 6/14/16 at 4:00pm and 6/18/16 at 4:00pm, resident # 1's glucometer reading of 128 on 6/14/16, and 210 on 6/18/16 were documented on the medication administration record, however these readings were not on the glucometer.

On 6/14/16 at 8:30pm, resident # 4's glucose reading of 259 was documented on the medication administration record, however this reading was not on the glucometer.

On 6/8/16 at 8:30am, resident # 5's glucose reading of 197 was documented on the medication administration record, however this reading was not on the 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.

Staff persons involved with resident #1 and #5 have been counseled in reference to following the prescribers directions.  
Staff person involved with resident #4 is no longer employed @ ICA.  
All nursing staff and medication assistants will be trained in competency and checking documentation by the end of each shift to assure accuracy and compliance. Dir of Res Care or Designee will do audits monthly.

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

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

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Plan of correction implementation status as of 8/5/16  
(Date)

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(Initials)

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