



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 18 2016

Ms. Mary Turnbaugh, President  
St. Anne's Retirement Community, Inc.  
Attn: Heather Weiss, PCHA  
3952 Colombia Avenue  
Colombia, Pennsylvania 17512

RE: St. Anne's Retirement Community  
A, B, C Wings, 2<sup>nd</sup> Floor, Building 2  
License #: 321790

Dear Ms. Turnbaugh:

As a result of the Department of Human Services' annual licensing inspections on September 7, 2016 and September 8, 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,

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 32179 - 09/07/2016 - Springs, Israel  
 PCH Name: ST ANNE S RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2800

2600.183(e) - Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION

A open syringe of Novolog for Resident #1 was not dated with the date that it was opened. According to the manufacturer's label, this medication expires 28 days after being opened, however the home is unable to determine when this 28 day period will end.

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.

On 9/8/2016 the novolog pen that was not dated was sent back to pharmacy, and a new novolog pen was placed in medication cart and was dated/initialed when novolog pen was opened.

Medication carts are being audited weekly to ensure each resident EMAR matches their medications and to ensure medications are initialed/dated as appropriate.

Please see attached form.

\* Staff responsible for medication administration shall be reeducated on the need for dating medications such as Novolog and inhalers when they are opened.

BAS 9/20/16

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Deborah Weiss PCHA/LPN*

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

Deborah Weiss

Date 9/15/2016

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The above plan of correction is approved as of

9/20/16  
 (Date)

Plan of correction implementation status as of

9/20/16  
 (Date)

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

The above plan of correction was approved by

BAS  
 (Initials)

Violation Report: 32179 - 09/07/2016 - Springs, Israel  
 PCH Name: ST ANNE S RETIREMENT COMMUNITY

**1. REGULATION 55 Pa.Code §2800**

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**

In review of the glucometer for Resident #1 the following discrepancies were found:

- On 9/2/16, at 4:00pm, the Medication Administration Record documented a blood sugar reading of 269 and the actual glucometer reading was 276.
- On 9/5/16, at 8:00pm, the Medication Administration Record documented a blood sugar reading of 132 and the actual glucometer reading was 122.

**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.

*Glucometers memory is being compared to EMAR daily for one month and then will be compared to EMAR weekly when DES performs weekly glucometer calibration*

*please see attached forms*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Leather Weiss PRN/CPN*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Leather Weiss PRN/CPN* Date *9/15/2016*

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

The above plan of correction is approved as of <u>9/20/16</u> (Date)	Plan of correction implementation status as of <u>9/20/16</u> (Date)
The above plan of correction was approved by <u>BA S</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