



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]
Mailing Date: January 25, 2017

Mr. Ray C. Miller, Owner/Administrator
Berks Leisure Living Inc.
1399 Fairview Drive
Leesport, Pennsylvania 19533

RE: Berks Leisure Living
License #: 205690

Dear Mr. Miller:

As a result of the Department of Human Services' licensing inspection on October 26, 2016 and November 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,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

1. REGULATION 55 Pa.Code §2600
 2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

Resident #1 did not receive the prescribed tylenol 325mg on 9/18/16 at 12am. The home did not submit an incident report to the Department regarding the medication error.

It has been determined through resident interviews that money has been found missing out of Resident #2 and #3's room. On both incidents the police department came to the home to investigate. The home did not submit an incident report to the Department.

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.

16c. This facility must ensure that we accurately manage incidents, track patterns of incidents and take the proper steps and precautions to prevent future incidents.

We are aware that all medication errors should be reported and regret that this was not done.

The Administrator reviewed with the Medical Manager and staff all Reportable Incidents so that everyone is clear about the details of Reportable Incidents. We must be more vigilant in our reporting process.

On the theft report: Because we had the police investigate these two incidents, we felt we had made the appropriate response. Management has been re-educated to the fact that any involvement by law enforcement should be reported as an incident.

Our residents have been reminded monthly of turning in their money to the office for safekeeping. Offers have been extended to them if they desire a lockbox, it will be provided to them.

The Administrator is responsible and will monitor for ongoing compliance to ensure all reports are sent in on Reportable Incidents. *including training all staff on all 19 events that must be reported.*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Patricia J Maynor*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) PATRICIA J MAYNOR Administrator Date 12/8/2016

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

The above plan of correction is approved as of <u>1-21-17</u> (Date)	Plan of correction implementation status as of <u>1-21-17</u> (Date)
The above plan of correction was approved by <u><i>[Signature]</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: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

1. REGULATION 55 Pa.Code §2600
 2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION
 On 10/26/16 at approximately 1:15pm the "staff book" was located unlocked and accessible on top of the medication cart located outside the Administrator's office. The book contains confidential information of the residents.

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.

17. We understand that our residents' information is confidential and it is vital that we protect this confidential information.


The staff book contains the blood sugars and status reports of some residents and must be kept locked up in the med cart when not in use. The staff had been amiss in doing this. This problem has been addressed and constant vigilance is being done by the Medical Manager and the Administrator. The Administrator is responsible and will monitor for ongoing compliance.

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *PATRICIA MAYNOR Administrator* Date *12/8/2016*

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Violation Report: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

1. REGULATION 55 Pa.Code §2600
 2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION
 It has been determined through interviews with staff and residents that staff person A, the home's Administrator can be rude and disrespectful to the residents.

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.

42c. How do I respond to a general statement like this accusation? There is no specific incident stated here for me to defend myself.

Anyone CAN be rude at any given time. Any resident CAN be rude when interrupting the administrator as she is helping another resident. How to respond appropriately is a sensitive area. To be blunt and tell them to wait may be considered rude as well as ignoring or being condescending. It's a matter of opinion.

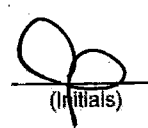
This Administrator is certainly aware of the Resident's Rights and will strive to be more conscious of her responses and reactions to difficult residents. This Administrator is responsible for compliance and will request the Director (Co-owner) to monitor her progress.

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 PCH Name: BERKS LEISURE LIVING

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
 On 9/17/16 from 11:19pm - 11:45pm there wasn't anyone in the home trained to administer medications. The home serves residents who have PRN medications.

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.

182b. It is very important that a Med Tech is on duty at all times in the home to ensure that medications are administered safely.

Admittedly, the Med Tech scheduled on this evening was late on arrival. The Administrator was made aware of this problem but was unable to persuade the second shift Med Tech to stay any longer, her ride was angry with the wait. Therefore a short period of time transpired (26 min) when a Med Tech was not available. Technically there is a one hour window to administer a medication and no harm was done.

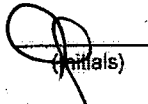
This facility did have some problems with poor third shift staffing. We have hired new staff and have trained more people for medication administration. The Administrator and Medical Manager have been active in the hiring and training of new staff. We stress the importance of punctuality and the reasons why our residents are affected. The Administrator is responsible and will monitor for ongoing compliance.

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Violation Report: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

1. REGULATION 55 Pa.Code §2600
 2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

2a. DESCRIPTION OF VIOLATION
 Upon entering the home at approximately 1:15pm the medication cart located outside the Administrators office was unlocked and accessible.

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.

183b. Our residents' medications must be kept safe from contaminates spillage or theft.


To leave the Med Cart unlocked is pure carelessness and is unacceptable. The staff has had a review of this rule. Ongoing vigilance by the Administration, Medical Manager and Med Techs is occurring. The Administrator is responsible for ongoing compliance.

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Violation Report: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

1. REGULATION 55 Pa.Code §2600
 2600.183(c) - Prescription medications, OTC medications and CAM stored in a refrigerator shall be kept in an area or container that is locked.

2a. DESCRIPTION OF VIOLATION
 Resident #4's 3 boxes of novolog flex pens and 5 boxes of levemir flex touch pens were unlocked and accessible in the refrigerator used to store medications.

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.

183c. Our residents' medications must be kept safe from contaminates spillage or theft.

Resident #4 had ordered too much insulin supplies and therefore had 2 lockboxes of insulin. Unfortunately the lock had been broken when the key went missing and the Administrator had not been notified. The lockbox was replaced immediately. These requirements were reviewed with the staff so that if such a problem would reoccur, there is an immediate notification so that necessary resolution does occur. The Administrator is responsible for ongoing compliance.

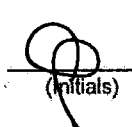
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Violation Report: 20569 - 10/26/2016 - Novak, Ryan
 PCH Name: BERKS LEISURE LIVING

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

2a. DESCRIPTION OF VIOLATION
 Resident #1 did not receive the prescribed tylenol 325mg on 9/18/16 at 12am.

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.

187d. It is crucial that this facility ensures that residents receive their medications and treatments as ordered by a physician.

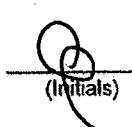
This occurrence was caused by the Med Tech arriving late for work and not performing her work correctly. This Med Tech was reprimanded after the mistake was detected the next week when the Medical Manager reviewed the MAR. The Medical Manager is the supervisor of the Medical staff. She monitors the MAR's. She reports to the Administration about any problems. In this instance she was on vacation at time of this incident. Ultimately the Administrator is responsible and will monitor for compliance.

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1. REGULATION 55 Pa.Code §2600

2600.188(b) - A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #1 did not receive the prescribed tylenol 325mg on 9/18/16 at 12am. The prescriber was not notified regarding the medication error.

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.

188b. Medication errors are a serious matter regardless of the type of medication. This error was not reported due to the insignificance of a missed dose. However, the Medical Manager has been re-educated to understand that any missed doses must be reported. After the fact, the doctor was notified about the missed dose of Tylenol.

The Med Techs and Medical Manager had a meeting to review the protocol that must be done when there is a medication error. The Administrator will monitor with the Medical Manager for ongoing compliance.

Repeat Violation: No

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