



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: MAR 13 2017

Ms. Carol DeLancey, CEO
The Community at Rockhill
3250 State Road
Sellersville, Pennsylvania 18960

RE: The Community at Rockhill
License #: 126870

Dear Ms. DeLancey:

As a result of the Department of Human Services' licensing inspection on November 22, 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,


Patricia Adams
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 12687 - 11/22/2016 - Thomas, Tahesia
 PCH Name: THE COMMUNITY AT ROCKHILL

1. REGULATION 55 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 11/18/16, at 9:00 am, staff member A did not correctly identify Resident # 1 before administering their 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.

Medtech [redacted] was reeducated to the steps of the Medication administration process, including correctly identifying the resident to whom the meds are prescribed.
 -The Medication Administration trainer will complete an observation during medpass weekly x 4 weeks starting 2/27/2017.
 The documentation will be returned for DHS review @

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

Carol N. Delancey

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Carol N. Delancey</i>	<i>2/28/17</i>

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

The above plan of correction is approved as of <u>3/3/17</u> (Date)	Plan of correction implementation status as of <u>3/3/17</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: 12687 - 11/22/2016 - Thomas, Tahesia
PCH Name: THE COMMUNITY AT ROCKHILL

1. REGULATION 55 Pa.Code §2600

2600.186(b) - Prescription medications shall be used only by the resident for whom the prescription was prescribed.

2a. DESCRIPTION OF VIOLATION

On 11/18/16, Resident # 1 was administered MAPAP 500mg, Aspirin 81mg, Bisoprolol Fumarate 10mg, Fosinopril Sodium 10mg, Furosemide 20mg, Multivitamin, and Vitamin B12 1000mg prescribed for and belonging to Resident # 2.

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.

Medtech [redacted] was reeducated to the steps of the medication administration process, including correctly identifying the resident to whom the meds are prescribed.
- the Medication Administration trainer will complete an Observation during medpass weekly x 4 weeks starting 2/27/2017.

The documents will be retained for Department review

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

Signature of Legal Entity Representative (Required on EVERY Page) *Carol N. Delancey*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Carol N. Delancey Date 2/28/17

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