



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 24 2017

Ms. Deborah McGowan,
Personal Care Administrator
Hollidaysburg Veterans Home
P.O. Box 319
Hollidaysburg, Pennsylvania 16648

RE: Hollidaysburg Veterans' Home
License #: 343600

Dear Ms. McGowan:

As a result of the Department of Human Services' annual licensing inspections on November 30, 2016 and December 1, 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 34360 - 11/30/2016 - Rosenblat, Dale
 PCH Name: HOLLIDAYSBURG VETERANS HOME

1. REGULATION 55 Pa. Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION

A glucometer labeled, "Ground Floor" was used for blood sugar checks for the following residents:

On 11/30/16, the glucometer had a reading of 159 for Resident #4, 133 for Resident #5, 158 for Resident #1, 177 for Resident #6, 147 for Resident #7 and 248 for Resident #8.

On 12/01/16, the glucometer had a reading of 170 for Resident #1, 125 for Resident #2 and 136 for Resident #3.

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.

See attached pages 2A + 2B of 4. -SE

Repeat Violation: No	Date(s) of Previous Violation(s):
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Arianna Rosenas, RHA, Emily Reckner, PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Arianna Rosenas, RHA, Emily Reckner, PCHA* Date *3/27/17*

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

The above plan of correction is approved as of 4-20-17
 (Date)

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

Plan of correction implementation status as of 4-26-17
 (Date)

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

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Regulation Cited: 2600.85(a)- Sanitary conditions shall be maintained.

How was the regulation violated: A glucometer labeled, "Ground Floor" was used for blood sugar checks for the following residents: On 11/30/16, the glucometer had a reading of 159 for Resident #4, 133 for resident #5, 158 for Resident #1, 177 for Resident #6, 147 for Resident #7, and 248 for Resident #8

Benefit of the regulation: Greatly minimizes the risk of resident illness, rodent and insect infestations, and provides dignified living conditions for residents.

Action plan to fix right away and prevent in the future: All residents were provided with their own personal glucometer which is labeled and stored in the nurse's station. There are emergency glucometers on each unit for those residents who may require a blood glucose reading and have not previously required a glucometer. Once one of the emergency glucometers are used for a resident it will be labelled with that residents name and kept for the use of that resident only for future needs.

A letter was sent to the families/POA's of all residents who receive blood sugar testing informing them that the facility in the past has used a shared glucometer that was cleaned after each use and will now be providing each resident their own glucometer labeled with the residents name for their use only due to blood borne diseases. Attached is a copy of the letter sent. A letter to notify the resident's physician to inform them of the shared glucometers was sent.

All licensed staff has been informed via directive and during orientation and annual in-service that each resident is to have their own personal glucometer. The Blood Glucose Monitor policy has been revised to include this information, and the Registered Nurse Instructors are providing training to all licensed staff on the updated policy to reiterate the previous directive.

Please see the attached training record/policy revision for Pa Code 55 training requirements.

Who is responsible for preventing future violation: The Registered Nurse Supervisors will monitor accuchecks on a weekly basis for a 3 month period to ensure that the procedure is being accurately followed. Documentation will be kept.

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License # 343600

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Who is responsible for preventing future violation: The Registered Nurse Supervisors will monitor accuchecks on a weekly basis for a 3 month period to ensure that the procedure is being accurately followed. Documentation will be kept.

Date corrected by: 3/24/17

Administrator Signature: Miss Rosemar

Date: 3/27/17

Administrator Signature: Emily Reckner

Date: 3/27/17

Violation Report: 34360 - 11/30/2016 - Rosenblat, Dale
 PCH Name: HOLLIDAYSBURG VETERANS HOME

1. REGULATION 55 Pa.Code §2600
 2600.181(d) - If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.

2a. DESCRIPTION OF VIOLATION
 Resident #9 self-administers medications and stores medications in his/her bedroom. On 12/1/16, the following medication were visible in an unlocked night stand drawer: Ibuprofen, Aspirin, Abilify, Amlodipine, Alorvastatin, Levothyroxine, Sertraline, Trazadone, Gabapentin, Levetiracetam and Divalproex. The bedroom door was unlocked.

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.

See attached Page 3 A + 3 B of 4. -SE

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Anissa Rosemer, PCMA Emily Reckner, PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Anissa Rosemer, PCMA Emily Reckner, PCHA* Date *3/27/17*

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 (Date)

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

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Regulation Cited: 2600.181(d)- If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.

How was the regulation violated: Resident #9 self-administers medications and stores medications in his/her bedroom. On 12/1/16, the following medications were visible in an unlocked nightstand drawer. Ibuprofen, Aspirin, Abilify, Amlodipine, Alorvastation, Levothyroxine, Sertraline, Trazadone, Gabapentin, Levetiracetam, Divalproex. The bedroom door was unlocked.

Benefit of the regulation: Permits residents to self-administer medications while minimizing the risk of damage to the medications or misuse of the medications by others.

Action plan to fix right away and prevent in the future: Resident #9 was evaluated for self-administration of medication on 12/1/16 and those privileges were revoked by the physician, to be reviewed again in 6 months if appropriate. All medications were removed from room. Resident #9 stated that [redacted] went off campus and forgot [redacted] left [redacted] medications unlocked. All residents who are determined to be appropriate for self-administration of medications are educated regarding their medications and proper storage at the time of the physician's order granting self-administration of medications and again with any medications changes. Resident's medications are also reviewed for proper storage and handling every month when medications are refilled by pharmacy. Medications stored in the resident's room shall be locked in a safe and secure location to protect against contamination, spillage and theft.

Any noted violation of resident self-administration procedure is immediately reported to the Registered Nurse Supervisor and the Physician and the resident's self-administration privileges are revoked as appropriate.

Attached is the policy for self-administration.

Who is responsible for preventing future violation: Licensed staff will monitor for compliance of the regulation.

Date corrected by: 12/1/16

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Administrator Signature: Miss Rosemary

Date: 3/27/17

Administrator Signature: Emily Rechner

Date: 3/27/17

Violation Report: 34360 - 11/30/2016 - Rosenblat, Dale
 PCH Name: HOLLIDAYSBURG VETERANS HOME

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

The medication administration record (MAR) for Resident #10 does not include a diagnosis or purpose for a prescribed injectable, Invega Systema, 1 injection 234 mg every 28 days.

The MAR for Resident #11, does not include a diagnosis or purpose for prescribed Metformin, 1000 mg, 1 tab, two times/day.

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.

See attached Page 4A + 4B of 4. -LE

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Missa Rosemas, PCHA Emily Recknor, PCHA

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

Missa Rosemas PCHA Emily Recknor PCHA

Date *3/27/17*

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Regulation Cited: 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 instructions.
- (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.

How was the regulation violated: The medication administration record (MAR) for Resident #10 does not include a diagnosis or purpose for a prescription injectable, Invega Systema, 1 Injection 234 mg every 28 days.

Benefit of the regulation: The home's staff person will be able to track all medications a resident receives and to ensure all medications are administered as prescribed.

Action plan to fix right away and prevent in the future: 2600.187(a)-

Resident #10 and Resident #11 did not have the diagnosis or purpose for prescribed medication on their MAR for one medication each because the licensed staff who transcribed the information from the physician's orders did not put the diagnosis under the "Special Instructions" tab. All licensed staff has been trained by the Registered Nurse Instructors from 1/17/17 thru 3/9/17, that the diagnosis needs to be placed under Special Instructions in order to show up on the printed

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MARs/TARs. The 11-7 licensed staff is also required to check the MARs/TARs during their shift to ensure that the diagnosis is present. The licensed staff involved in both of these incidents was sent for retraining with the Registered Nurse Instructors regarding medication transcription and ensuring that orders are properly transcribed into the electronic system.

Who is responsible for preventing future violation: Licensed staff on the 11p-7a shift and Registered Nurse Supervisors will monitor for compliance of this regulation.

Date corrected by: 3/9/17

Administrator Signature: Arissa Thomas

Date: 3/27/17

Administrator Signature: Emily Reckner

Date: 3/27/17