



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 24 2017

Mr. Stephen Bruce,
Executive Director
Devereux Foundation Inc.
139 Leopard Road
Berwyn, Pennsylvania 19312

RE: Devereux PA Adult Services PCH – Hilltop Cottage
237 Leopard Road
Berwyn, Pennsylvania 19312
License #: 198190

Dear Mr. Bruce:

As a result of the Department of Human Services' annual licensing inspections on December 13, 2016 and December 14, 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: 18819 - 12/13/2016 - Rosenblat, Dale
 PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLTOP COTTAGE

1. REGULATION 55 Pa.Code §2600
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION
 On 12/14/2016, there was an accumulation of lint in the lint trap of the home's dryers located in the laundry room.

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 will assist residents with completing their laundry. The dryer vent will be cleaned after each use to ensure that it is free of lint. A final check will be done at the end of each shift for accountability purposes. A shift by shift checklist has been developed for staff to sign/initial the assignment log to indicate that the task was completed.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley, Director of Quality Management* Date *01/18/2017*

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

The above plan of correction is approved as of 1-30-17
 (Date)

Plan of correction implementation status as of 1-30-17
 (Date)

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

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

Violation Report: 19819 - 12/13/2016 - Rosenblat, Dale
 PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLTOP COTTAGE

1. REGULATION 55 Pa.Code §2600
 2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION
 The home's menu for December, 2016 was not posted in the home.

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.

A weekly menu will be developed and posted on the bulletin board in kitchen at all times. Supervisor will remove menu from the previous week and replace it with the new week's menu every Monday. Each menu shall be posted one week in advance.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	11/17/2015		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Bonnie Farley, Director of Quality Management* Date *01/18/2017*

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The above plan of correction was approved by <u>BF</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: 19819 - 12/13/2016 - Rosenblat, Dale
PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLTOP COTTAGE

1. REGULATION 55 Pa.Code §2600

2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION

On 12/14/2016, the home's vehicle first aid kit did not contain the following items;
disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, tape, tweezers or a breathing shield

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.

The first aid kit in the van will be checked monthly by staff as part of their scheduled assignment to ensure that all required first aid items are in the kit. Also, the supervisor will carry out additional checks as well to ensure that all first aid items are in the first aid kit.

Identified items were added to the van's first aid kit by 1/18/17. -~~SE~~

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Bonnie Faley

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

Bonnie Faley, Director of Quality Management

Date

01/18/2017

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Violation Report: 19819 - 12/13/2016 - Rosenblat, Dale
 PCH Name: DEVEREUX PA ADULT SERVICES PCH HILLTOP COTTAGE

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

Resident #1 requires blood sugar checks before breakfast, dinner and at bedtime. The blood sugar reading was not initialed by staff taking the reading on December 3 and 4, 2016 before dinner or December 11, 2016 at 8 am.

Resident #2 has a prescription for Propranolol, 40 mg 1 tab at 4 pm and 8 pm. On December 12, 2016 at 8 pm, the Medication Administration Record (MAR) was not initialed by a staff person administering the medication.

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.

Resident #1: The healthcare coordinator (nurse) will train staff involved regarding the importance of recording blood sugar levels and initialing the medication record. Training recordings will be forwarded to the Human Resources Department for filing, due date is 1/27/2017. On a daily basis, staff on the overnight shift will check the MAR's each night and notify the program supervisor of any findings. Once this is completed, the supervisor will follow progressive discipline per policy as outlined in PA Adult Medication Administration Process, due date 1/27/2017. Failure to follow the steps outlined in this plan of correction will lead to re-training and progressive discipline. Resident #2: The program supervisor will counsel and train staff involved regarding the importance of recording and initialing the medication record. Training recordings will be forwarded to the Human Resources Department or filing, due date 1/27/2017. On a daily basis, the overnight staff will check the medication record each night and notify the program supervisor for compliance with documentation on the medication record. Once this is completed the supervisor will follow progressive discipline per policy as outlined in the PA Adult Services Medications Administration Process, due date 1/27/2017. Failure to follow the steps outlined in this plan of correction will lead to re-training and progressive disciplinary action.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

11/17/2015

Signature of Legal Entity Representative
 (Required on EVERY Page)

Bonnie Fuly

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

Bonnie Fuly, Director of Quality Management

Date
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