



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]  
Mailing Date: March 30, 2017

Mr. Nathaniel D. Pace  
Administrator  
Morris-Pace Assisted Living Inc.  
416 Reading Avenue  
West Reading, Pennsylvania 19611

RE: Morris-Pace Personal Care  
License #215900

Dear Mr. Pace:

As a result of the Department of Human Services' licensing inspection on December 13, 2016, December 20, 2016 and January 10, 2017 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: 21590 - 01/13/2017 - Harvey, Jason 12-13-16 CP  
 PCH Name: MORRIS PACE PERSONAL CARE

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

2a. DESCRIPTION OF VIOLATION

Resident #1 was required by the home to clean their bedside commode container and bring it to the staff in the office daily for sanitizing. According to the resident, they would have to walk through the facility and pass their peers to have the commode container sanitized. The resident indicated that they were embarrassed to walk through the facility with a commode container on a daily basis.

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.

2600.42(c)

1. ~~Every resident must be treated with dignity & respect~~
2. Resident's case manager, resident, [redacted] supervisor, & I had a meeting about the commode in resident's room. A year and a half ago I suggested that a commode be put in [redacted] bedroom because of [redacted] urinating in the trashcan in [redacted] bedroom, [redacted] Aunt agreed that resident would dump the commode daily and went out and purchased it. There was not a problem with it until the end of November 2016. At this meeting, it was decided by [redacted] case manager, the case managers supervisor & the resident that the resident would show us the empty bucket from the commode daily and then [redacted] will be given [redacted] cigarette. The commode was found to have urine in it by resident's brother and AAA was called. Ombudsman came out to investigate and I told the Ombudsman that I would remove it since it's becoming a problem, however, the residents Aunt didn't want us to do that and called DHS.
3. Trying to assist the resident with [redacted] urinating issue by suggesting a commode, completely unaware that I created a problem for our facility because the resident's Aunt complained that we (staff) weren't dumping/cleaning it.
4. Resident moved, no longer a problem.
5. Morris-Pace will not allow another commode in any bedrooms!!
6. Administrator will be responsible for compliance.

*Cigarettes will not be used as a reward/punishment and adl care is rendered w/ dignity and respect.*

Repeat Violation: No      Date(s) of Previous Violation(s):      3-30-17 CP

Signature of Legal Entity Representative (Required on EVERY Page) *Nathaniel D. Pace*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nathaniel D. Pace*      Date *2/2/17*

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

The above plan of correction is approved as of 3/30/17 (Date)

Plan of correction implementation status as of 3-30-17 (Date)

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

The above plan of correction was approved by *[Signature]* (Initials)

Violation Report: 21590 - 01/13/2017 - Harvey, Jason 12-13-16 CP  
 PCH Name: MORRIS PACE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600  
 2600.43(b) - A resident's rights may not be used as a reward or sanction.

2a. DESCRIPTION OF VIOLATION  
~~Resident #1 was required by the home to empty their portable commode container and bring it to the staff in the office on a daily basis for sanitizing. The resident would have to walk to the office to get the portable commode container sanitized in order to receive a cigarette for meeting this goal.~~

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.*

2600.43(b)

1. Residents rights must be upheld at all times
2. At the meeting with the S.A.M. case management, I didn't stop the idea of giving the resident [redacted] cigarette AFTER [redacted] brought down the commode.
3. Bargaining the Residents Rights.
4. Find another way to encourage a resident to complete their tasks.
5. Adhere to the all Residents Rights, no matter the reason.
6. Administrator shall be responsible for compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Nathaniel D. Pace*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>NATHANIEL D. PACE</i>	Date <i>2/2/17</i>
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The above plan of correction is approved as of <u>3/30/17</u> (Date)	Plan of correction implementation status as of <u>3/30/17</u> (Date)
The above plan of correction was approved by <u><i>Op</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: 21590 - ~~01/13/2017~~ Harvey, Jason 12-13-16 CP  
 PCH Name: MORRIS PACE PERSONAL CARE

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

2a. DESCRIPTION OF VIOLATION  
~~Resident #1 has a doctor's order from 12/14/09 for blood glucose checks twice daily at 9am and 9pm, the home failed to follow the doctor's orders.~~

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.

2600.187(d)

1. Staff must follow Dr's orders as prescribed.
2. Regulation was not violated by Morris-Pace, Morris-Pace has a policy that all residents MUST complete their own blood glucose checks and insulin injections dated 6/10/10. (see attached)
3. I was informed by DHS that due to Morris-Pace not "offering" the glucose monitor daily" this caused the violation.
4. Resident has re-located into a Intellectual Disability facility.
5. Morris-Pace will offer the monitor daily as prescribed.
6. Administrator will be responsible for compliance.

The home will assess the resident annually for this ability, confer w/ the Primary Care Physician regarding residents' abilities to self-perform these tasks, and update as needed - to include assistance w/ relocation if necessary.

CP. 3/30/17

Repeat Violation: Yes	Date(s) of Previous Violation(s): 03/17/2016	
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Signature of Legal Entity Representative (Required on EVERY Page) *Nathaniel D Pace*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Nathaniel D Pace	Date 2/2/17
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The above plan of correction is approved as of 3/30/17  
 (Date)

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