



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 24 2017

Ms. Amy Light,
LPN, PHCA
Redstone Presbyterian SeniorCare
6 Garden Center Drive
Greensburg, Pennsylvania 15601

RE: Redstone Highlands
4 Garden Center Drive
Greensburg, Pennsylvania 15601
License #: 443360

Dear Ms. Light:

As a result of the Department of Human Services' annual licensing inspection on January 25, 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.

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: 44336 - 01/26/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 55 Pa.Code §2600
 2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:
 (1) Medication self-administration training.
 (2) Instruction on meeting the needs of the residents as described in the proadmission screening form, assessment tool, medical evaluation and support plan.
 (3) Care for residents with dementia and cognitive impairments.
 (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
 (5) Personal care service needs of the resident.
 (6) Safe management techniques.
 (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION
 The home's staff training year is 1/1-12/31. Direct care staff person A did not receive annual training in 2016 on medication self-administration.

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.

Violation Report 44336 -01/25/2017

Redstone Highlands Greensburg

26.00. 65(f)

Plan of Correction

Staff training plan has been updated by the Personal Care Manager to add Medication Administration to be done annually in the month of February. *The training plan will include medication self-administration training for all direct care staff persons. BB 4/14/17*
 All personal care staff and ancillary personal care staff has completed the Medication Administration education on 02/09/2017. Please see attached educational Material and quizzes.
 Immediately and at least monthly thereafter -The administrator will review the home's annual staff training plan for compliance. *BB 4/14/17*

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Amy Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Amy Light* Date *2/15/17*

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

The above plan of correction is approved as of 4/14/17
 (Date) Plan of correction implementation status as of 4/14/17
 (Date)

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

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

Violation Report: 44336 - 01/25/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 66 Pa.Code §2600
 2600.82(a) - Poisonous materials shall be stored in their original, labeled containers.

2a. DESCRIPTION OF VIOLATION

There was a bottle labeled nail polish remover that contained an unknown thick, white substance, located in the resident storage area marked A005.

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.

Violation Report 44336 -01/25/2017
 Redstone Highlands Greensburg
 26.00. 82 (a)

Plan of Correction

The Personal Care Manager removed the bottle labeled nail polish remover that contained an unknown thick, white substance located in the resident storage area on 1/25/2017. The resident storage area will be checked monthly by the Personal Care Manager and or / designee for poisonous materials and materials that are not in original labeled containers. If items are found they will be removed until families can lock the storage unit.

Please see attached tracking sheet.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Amy Light* Date *2/15/17*

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The above plan of correction was approved by <u>BB</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>BB</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44336 - 01/25/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 55 Pa.Code §2800
 2600.82(c) - Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

2a. DESCRIPTION OF VIOLATION

Not all residents of the home, including resident #1, #2 and #3, have been assessed capable of recognizing and using poisons safely. A 32 ounce H2 orange heavy duty cleaner with a label indicating to call poison control if swallowed was unlocked and accessible in an activities cabinet of the Garden level dining 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.

Violation Report 44336 -01/25/2017
 Redstone Highlands Greensburg
 26.00. 82(c)

Plan of Correction

The 32 ounce H2 Orange heavy duty cleaner was removed from the unlocked area on 1/25/17. The item was placed in the janitor's closet. The janitor's closet is locked and staff can retrieve the key from the Personal Care Manager, the charge nurse or Housekeeping if that cleaning item is needed.

The PC Manager and/or designee will monitor for compliance by conducting weekly checks of these areas. The PC Manager and / or designee shall make sure chemicals are not stored in locations accessible to the resident. Staff notification and education was done on 02/09/17 at the monthly staff meeting in regards to poisonous materials shall be kept in locked areas and inaccessible to residents.

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Signature of Legal Entity Representative
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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44336 - 01/25/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 55 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION

At 10:17 a.m., the water temperature at the sink in the bathroom next to room A115 marked laundry measured 121.4 degrees Fahrenheit.
 At 11:47 a.m., the water temperature in the sink in the Courtyard laundry room marked A2 measured 129.0 degrees Fahrenheit.
 At 11:52 a.m., the water temperature in the sink in the Courtyard country kitchen measured 128.3 degrees Fahrenheit.

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.

Violation Report 44336 -01/25/2017
 Redstone Highlands Greensburg
 26.00. 89(b)

Plan of Correction

1. At 11:52 A.M. on 1/25/2017 Maintenance replaced the mix valve with another mix valve and set temp to 110-115 degrees.
2. Daily water temperatures are recorded in this area. Maintenance installed new set point to water temperature of 110-120.
3. The Personal Care Manager will review the water temperature log with Maintenance on a monthly basis.

Please see attached temperature log for tracking

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Violation Report: 44336 - 01/25/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 55 Pa.Code §2600
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION
 Resident #3's prescription for docusate sodium 100 mg tablet was discontinued on 12/20/16; however, the medication was still stored in the medication cart.

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.

Violation Report 44336 -01/25/2017
 Redstone Highlands Greensburg
 26.00. 183(d)

Plan of Correction

PC Manager conducted staff education on 1/25/17 with PC Nurse to remove all D/C medications and notify pharmacy of medication change to residents. Docusate sodium 100mg tablet was removed and Pharmacy was notified of change in resident's 3 medications. Pharmacy has been contacted to come in and do a complete cart audit on 02/20/17. PC nurses will do monthly cart audits and medication MAR reviews. These reviews will be forwarded to the PC Manager for final signature of compliance.

Please see attached monitoring tool sheet and education that was provided.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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 (Required on EVERY Page) *Amy Light*

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Violation Report: 44336 - 01/25/2017 - Summers, Vicky
 PCH Name: REDSTONE HIGHLANDS

1. REGULATION 55 Pa.Code §2600
 2600.184(a) - The original container for prescription medications shall be labeled with a pharmacy label that includes the following:
 (1) The resident's name.
 (2) The name of the medication.
 (3) The date the prescription was issued.
 (4) The prescribed dosage and instructions for administration.
 (5) The name and title of the prescriber.

2a. DESCRIPTION OF VIOLATION
 Resident #2 is ordered Glipizide tablet 5 mg - 1 tablet by mouth 1 time a day; however, the medication label indicates Glipizide tablet 5 mg - 1 tablet by mouth twice a day before meals.
 Resident #2 is ordered Glucose tablet 4 gm - 1 tablet by mouth every 24 hours as needed; however, the medication label indicates Glucose tablet 4 gm - 4 tablets as needed.
 Resident #3 is ordered Zolofit tablet 50 mg - 1 tablet by mouth at bedtime; however, the medication label indicates Zolofit tablet 50 mg - 1 tablet at 8:00 p.m.
 Resident #3 is ordered Norco tablet 5-325 mg - 1 tablet by mouth every 12 hours as needed for pain; however, the medication label indicates Norco tablet 5-325 mg - 1 tablet twice daily as needed for pain.
 Resident #5 is ordered Docusate Sodium 100 mg - 1 capsule by mouth as needed; however, the medication label indicates Docusate Sodium 100 mg - 1 capsule 2 times a day as needed.

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.

Please see attached Plan of Correction Page 9A

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Violation Report 44336 -01/25/2017
Redstone Highlands Greensburg
26.00. 184(a)

Plan of Correction

Direction change labels were applied on 01/25/17 while surveyors were present for the resident's number 2, 3, and 5. PC Manager conducted staff education on 1/25/17 with PC Nurse to apply direction change stickers to all labels that had medication changes. Staff to notify pharmacy of medication change to residents and make sure label of medication is updated next time medication is re-ordered from Pharmacy. Pharmacy has been contacted to come in and do a complete cart audit on 02/20/17. PC nurses will do monthly cart audits and medication MAR reviews. These reviews will be forwarded to the PC Manager for final signature of compliance.

Please see attached monitoring tool sheet and education that was provided.

2/15/17 submitted

Amy Light

Amy Light Today date 4/14/17

RECEIVED

APR 14 2017

**WEST REGION FIELD OFFICE
Human Services Licensing**

B8 4/14/17

Violation Report: 44336 - 01/25/2017 - Summers, Vicky PCH Name: REDSTONE HIGHLANDS	
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 #4's January 2017 medication administration records did not include the dose for Acetaminophen tablet - 2 tablets by mouth every 6 hours as needed.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i>	
Violation Report 44336 -01/25/2017 Redstone Highlands Greensburg 26.00. 187 (a)	
Plan of Correction PC Manager conducted staff education on 1/25/17 with PC Nurse makes sure medication MARS is audited. Resident's 4 Mar was updated adding the doses for the Acetaminophen tablet. Pharmacy has been contacted to come in and do a complete cart audit on 02/20/17 and will include MARS audit. PC nurses will do monthly cart audits and medication MAR reviews. These reviews will be forwarded to the PC Manager for final signature of compliance. Please see attached monitoring tool sheet and education that was provided	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) <i>[Signature]</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Army Light</i>	Date <i>2/15/17</i>
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