



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 15 2017

Ms. Holly Moylan,
Executive Director
450 East Philadelphia Avenue Operations LLC
450 East Philadelphia Avenue
Shillington, Pennsylvania 19607

RE: Mifflin Court
License #: 222060

Dear Ms. Moylan:

As a result of the Department of Human Services' annual licensing inspection on February 1, 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.

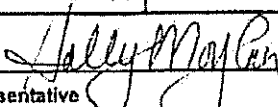

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing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

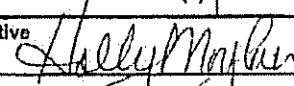

Sincerely,

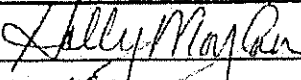

A handwritten signature in black ink that reads 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 22206 - 02/01/2017 - Hummel, Jesse PCH Name: MIFFLIN COURT	
1. REGULATION 55 Pa.Code §2600	
2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.	
2a. DESCRIPTION OF VIOLATION	
Department Representatives observed the Licensing Inspection Summary (LIS) dated 2/11/16 posted in the lobby of the facility. Attached to the (LIS) is the Resident Privacy Coding document, which reveals private and confidential health information of the resident's included in the (LIS).	
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>	
<p>The resident privacy coding document was removed from the lobby posting as soon as it was discovered. All postings were reviewed to ensure that no resident information was visible. All postings will be reviewed by the Administrator prior to posting to make sure no resident information is visible going forward. Administrator or designee will monitor for compliance.</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Holly Moylan, Executive Director	2/20/17
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>3/22/17</u> (Date)	Plan of correction implementation status as of <u>3/22/17</u> (Date)
The above plan of correction was approved by  (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: 22206 - 02/01/2017 - Hummel, Jesse PCH Name: MIFFLIN COURT	
1. REGULATION 55 Pa.Code §2600 2600.84 - Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.	
2a. DESCRIPTION OF VIOLATION Department Representatives observed each fire tower. Located on the first floor level of each tower are radiant baseboard heaters. The heaters do not have a guard in place to prevent residents from coming in contact with the heaters. The outside temperature of the heater measured 129.5 degrees Fahrenheit.	
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> The heater was turned down the day of inspection. Covers were placed over the baseboard heaters to make a barrier to prevent contact with the heat source (see picture). Administrator or designee will monitor for compliance.	
Repeat Violation: No.	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) 	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Holly Moylan, Executive Director	
Date 2/20/17	
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Violation Report: 22206 - 02/01/2017 - Hummel, Jesse PCH Name: MIFFLIN COURT	
1. REGULATION 55 Pa.Code §2600 2600.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.	
2a. DESCRIPTION OF VIOLATION Department Representatives observed the third floor laundry area. Observed behind the clothing dryer was a white cotton sock lying on the dryer vent. The cotton sock is combustible and is a fire hazard.	
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 sock was removed immediately upon discovery. The shelf above the dryers were lowered to help prevent items from falling behind the dryers (see picture). Area will be monitored for any flammable items by Administrator or designee.	
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Violation Report: 22206 - 02/01/2017 - Hummel, Jesse	
PCH Name: MIFFLIN COURT	
1. REGULATION 55 Pa.Code §2800	
2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	
2a. DESCRIPTION OF VIOLATION	
On 4/25/16 at 3:03am the facility conducted a fire drill. Resident #1 did not evacuate as required.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)	
<p><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></p> <p>Staff did educate resident on the importance of evacuation for all drills at the time of the drill and again it was stressed by the administrator the next morning. On 4/28/16, the facility did repeat the fire drill at 12:57 a.m. and all residents, including the resident that did not evacuate on 4/25/16, evacuated to a fire safe area in the allotted time. There were no further incidences since 4/25/16. All drills will be monitored for compliance.</p> <p>Further Instances of Failure to evacuate will be documented on the fire safety drill documents (or attachments) and in the resident record. Repeated failure to evacuate will result in the home issuing a 30 day notice to non-compliant resident(s). </p> <p style="text-align: right;">3/22/17</p>	
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Holly Moylan, Executive Director	Date 2/20/17
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Violation Report: 22206 - 02/01/2017 - Hummel, Jesse
 PCH Name: MIFFLIN COURT

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 prescribed Warfarin Sodium 1mg - 3 tablets once daily. The pharmacy medication label incorrectly indicates: Warfarin Sodium 1mg - Take 3 1/2 tablets once daily and Warfarin Sodium 4mg - Take 1 tablet once daily.

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 warfarin sodium supplies with the incorrect pharmacy labels were removed from the medication cart and returned to the pharmacy. The medication carts were checked for any other medications with pharmacy labels that did not match the physician orders, none were found. Staff were educated to return to the pharmacy any medications that do not have a current order. Administrator or designee will monitor for compliance.

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

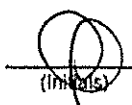
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