



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: May 22, 2017

Mr. Eddy J. Inzana
CEO/ President
Guardian Elder Care at Tyrone I, LLC
P.O. Box 240
8796 Route 219
Brockway, Pennsylvania 15824

RE: Epworth Healthcare and Rehabilitation Center
925 South Lincoln Avenue
Tyrone, Pennsylvania 16686
Certificate #: 328420

Dear Mr. Inzana:

As a result of the Department of Human Services' 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.

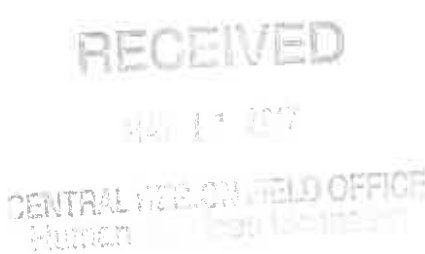
Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER		License Number: 32842
Address: 925 S LINCOLN AVE, TYRONE, PA 16686		County: Blair
Administrator: Melissa Malerhofer		Region: CENTRAL
Legal Entity Name: GUARDIAN ELDER CARE AT TYRONE I LLC		
Legal Entity Address: 8796 ROUTE 219 PO BOX 240, BROCKWAY, PA 15824		
Certificate(s) of Occupancy		
C-2 LP 08/06/2002 L&I	I-2 12/12/2013 Borough of Tyrone	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 40	Waking Staff: 30
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint, Incident		
On-Site Inspections Dates and Department Representatives On-Site 02/01/2017: Hoover, Douglas		
Off-Site Inspection Dates and Inspectors, If Applicable		
		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 54 Number of Residents Served: 31 Secured Dementia Care Unit in Home: Yes Area: Memory Support Secured Dementia Unit Capacity, If Applicable: 12 Number of Residents Served in Secured Dementia Care Unit, if applicable: 6 Number of Current Hospice Residents: 5 Number of Hospice Residents in past year: 11	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 31 Have Mental Illness: 1 Have an Intellectual Disability: 0 Have a Mobility Need: 9 Have a Physical Disability: 0	

Violation Report: 32842 - 02/01/2017 - Hoover, Douglas
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

1. REGULATION 55 Pa.Code §2600
 2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION
 The exit door in the activity room was blocked by two long tables on the inside and wicker furniture on the outside. The tables and furniture were directly against the exit door on both sides.

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.

1. This regulation is important so that people can escape in an emergency situation.
2. This regulation was violated because there were tables inside blocking the exit doors and wicker furniture outside the doors blocking the exit.
3. The violation occurred because tables were inappropriately placed in front of the doors and furniture outside was blocking the doors.
4. The tables were immediately removed from in front of the doors and the patio furniture outside was moved clearing the exit doors.
5. To prevent future violations there will be daily audits completed for one month then weekly audits to ensure that exits are clear of obstruction. Staff will be educated on the importance of keeping the exits clear at all times. Education will be completed by 5/22/2017.
6. Administrator and staff will be responsible for preventing future violations.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Melissa Maierhale, PCHA</u>	Date <u>5/12/17</u>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>5-22-17</u> (Date) The above plan of correction was approved by <u>ME</u> (Initials)	Plan of correction implementation status as of <u>5-22-17</u> (Date) <input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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Violation Report: 32842 - 02/01/2017 - Hoover, Douglas
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

1. REGULATION 55 Pa.Code §2600
 2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

2a. DESCRIPTION OF VIOLATION
 The main doors in the secure dementia care unit (SDCU) did not have posted directions for operating the electronic locks. The release button for opening the doors was around the corner in the nurse's station and not visible from the main doors.

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.

1. This regulation is important so that persons without an identified need to be in a SDCU can exit at will.
2. The regulation was violated because visitors to the SDCU cannot exit the main doors without the assistance of staff.
3. The violation occurred because the keypad to exit the main doors is around the corner of the nurse's station and not visible to the main doors.
4. To fix this violation the facility will have an electronic key pad installed within the next 60 days at the main doors of the SDCU with the instructions conspicuously posted so visitors can exit the unit without the assistance of staff. Signage will be posted for visitors to notify staff prior to exiting the unit so that staff can continue to monitor the doors for resident safety.
5. The administrator and staff will be responsible to prevent future violations.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	09/27/2016	
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Signature of Legal Entity Representative
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Melissa Maierhofer, PCHA</u>	Date <u>5/12/17</u>
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