



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via email to: [REDACTED]

MAILING DATE: March 27, 2017

Mr. Anthony J. Cooper, Executive Director/COO
Maria Joseph Manor Inc.
875 Montour Boulevard
Danville, Pennsylvania 17821

RE: Nazareth Memory Center at Maria Joseph
610 Schoolhouse Road
Danville, Pennsylvania 17821
License #: 211150

Dear Mr. Cooper:

As a result of the Department of Human Services' licensing inspection on February 23, 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,

Michele Moskalczyk
Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 21115 - 02/23/2017 - Rushin, Julianne
PCH Name: NAZARETH MEMORY CENTER AT MARIA JOSEPH

1. REGULATION 55 Pa. Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION
 The medical evaluation for resident #1 dated 7/28/16, does not include the resident's temperature, immunization history or the need for Secure Dementia Care.

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 letter to all attending physicians, requiring each Documentation of Medical Evaluation (DME) form be completed in it's entirety, and no area of the standardized DME provided, be left blank.

- Nursing Staff will review each returned/signed DME for completeness, within the correctly scheduled timeframe, and will expedite corrections from the assigned physician, should any area be missed, from the time of Resident's return from the annual and/or initial appointment.
- The facility's Administrator and Clinical Care Coordinator will monitor and assure ongoing compliance.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Jody F. Hummel	Date 03/22/2017
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/27/17</u> (Date)	Plan of correction implementation status as of <u>3/27/17</u> (Date)
The above plan of correction was approved by <u>M</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: 21115 - 02/23/2017 - Rushin, Julienne
 PCH Name: NAZARETH MEMORY CENTER AT MARIA JOSEPH

1. REGULATION 55 Pa.Code §2600
 2600.142(a) - The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.

2a. DESCRIPTION OF VIOLATION

On 1/13/17 at 10:30 am, activities staff person "C" noted that resident #1 was not behaving normally. Staff person "C" requested that staff persons "A" and "B" check on resident #1's health status; however they ignored the request and failed to provide the resident with an assessment.

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.

Persons A and B, did not respond to Person C's request for medical assessment and was not address, on behalf of the Resident, so that the Resident's health needs were met timely.

- Staff Education: When health concerns of any Resident are brought to any nursing staff member, from any persons - (other staff, other departments, visitors or outside vendors), each staff member being sought will stop whatever they are doing, in the most timely manor, appropriate to safety concerns, and visually & physically assess said Resident immediately.
- Monthly impromptu simulations will be conducted, whereby Leadership asks a nursing staff member to assess a given Resident with a mock-health status change.

The administrator shall monitor for ongoing compliance. *m*
 3/27/17

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