



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUN 05 2017

Ms. Sandra L. Tristan,
Director
Milton Developmental Services Inc.
58 Walnut Street, P.O. Box 416
Milton, Pennsylvania 17847

RE: Milton Developmental Services
License #: 213730

Dear Ms. Tristan:

As a result of the Department of Human Services' annual licensing inspection on March 17, 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
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

PCH Name: MILTON DEVELOPMENTAL SERVICES		License Number: 21373
Address: 58 WALNUT STREET P O BOX 416, MILTON, PA 17847		County: Northumberland
Administrator: Cynthia Catherman		Region: NORTHEAST
Legal Entity Name: MILTON DEVELOPMENTAL SERVICES INC		
Legal Entity Address: P.O. BOX 416, MILTON, PA 17847		
Certificate(s) of Occupancy I-1 03/17/2017 Milton Borough		
Staffing Hours Resident Support: 0 Total Daily Staff: 16 Waking Staff: 12		
Type of Inspection: Full BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 03/17/2017: Novak, Ryan		
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: 18 Number of Residents Served: 16 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 11 Are 60 Years of Age or Older: 5 Have Mental Illness: 0 Have an Intellectual Disability: 16 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

1. REGULATION 55 Pa.Code §2600

2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

The home is heated by an oil boiler. The cooking stove located in the kitchen is gas fired. The home does not have a carbon monoxide detector installed 15 feet from the fossil fueled burning devices as required by the Care Facility Carbon Monoxide Alarms Standard Act.

The home does not have the Department of Health's Influenza Awareness Act Poster posted in a public conspicuous area of the home as required.

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) On the day of our licensing survey, during inspection, carbon monoxide detectors were purchased. Our building code enforcement officer was notified, ([redacted] Milton Borough Code enforcement) and all detectors were placed per required mandates and codes.

2) The Dept. of Health's Influenza Awareness Act Poster is posted in public areas throughout the facility.

MDS will comply with all applicable Federal, State and local laws, ordinances and regulations. The Administrator is ultimately responsible to ensure compliance

SEE Attached

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) Cynthia M. Cushman Date 4/25-17

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

The above plan of correction is approved as of 5-8-17 (Date) Photos provided

Plan of correction implementation status as of 5-8-17 (Date)

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

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

Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

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

Extinguished cigarette butts were located in the garbage can near the entrance to the home, posing a possible 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.

Residents have been provided with instruction for proper disposal of cigarettes/cigarette butts. A review was completed on Mar 22, 2017 to ensure fire safety. All residents have acknowledged an understanding of the importance of this and willingness to comply. The Adm will make periodic checks to ensure compliance.

See Attached

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)

Cynthia M. Czerwinski, Adm.

Date

4-25-17

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(Date)

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(Date)

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Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

1. REGULATION 55 Pa. Code §2600

2600.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- (4) A staff person who has completed the medication administration training as specified in § 2600.190 for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A passed the initial medication training on 2/17/17. Additional training in order to administer other than oral medications such as inhalers, eye/ear/nose drops, suppositories, topical creams, and epinephrine injections was not provided.

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.

Direct Care Staff person A has now received the additional required training to complete Med TRAINING Certification. All future staff persons completing the Medication Administration training will be provided with the additional required training to include topical, eye, nose, and eardrop prescription meds, insulin injections and epinephrine injections. A training has been provided on April 7, 2017 to All Current medication Administrators to complete the requirements and maintain full certification. The Medication Adm. TRAINER will be responsible to notify the Facility Adm. to arrange this training for any/all future Med Adm. who take the Dept's training to complete the requirement. Trainer is and LPN. 03-8-17 see attached

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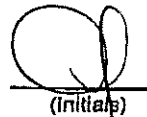
Cynthia M. Catherine, Adm

Date 4-25-17

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Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

1. REGULATION 56 Pa.Code §2600

2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

2a. DESCRIPTION OF VIOLATION

The first aid kit located on the first and second floor of the home contained aspirin, non-aspirin and antiseptic cream. The first aid kits are unlocked and accessible to the residents.

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 OTC medications (Aspirin/Antiseptic cream) have been removed from the First Aid Kits Located throughout the home. When/if new kits are purchased the OTC medication will be removed prior to placement within the home. The medical coordinator is responsible to ensure this occurs with a thorough examination prior to placement. The Administrator will conduct periodic checks to ensure compliance is maintained.

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(Initials)

Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

1. REGULATION 55 Pa.Code §2600

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION

The home's medication policy notes narcotics will be counted during change of shift. Resident #1 is prescribed Acderal 20mg, the home is not counting the narcotic as per the policy.

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.

per our facility policy narcotics are currently being counted at the change of each shift. Documentation by the shift ending and beginning is performed as directed and required. A form has been compiled and currently in use for this to occur. The medical coordinator is responsible to monitor this on a regular basis. The adm will also make periodic checks.
see attached

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Violation Report: 21373 - 03/17/2017 - Novak, Ryan
PCH Name: MILTON DEVELOPMENTAL SERVICES

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

Resident #1 was admitted to the home on [redacted] #16, the pre-admission screening was completed on [redacted] 16.

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.

An updated screening has now been completed for Resident #1. Prior to admission a determination shall be made using the Department's pre-admission screening form ensuring the resident's needs can be met. Pre-admission screening will always occur within 30 days of admission. If this time period is exceeded a new screening will be completed. The Adm is responsible for completion a specified see attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Cynthia M. Cashman* Date *4-25-17*

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