



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: April 21, 2017

Ms. Deborah McGowen
Administrator
Hollidaysburg Veterans' Home
P.O. Box 319
Hollidaysburg, Pennsylvania 16648

RE: Hollidaysburg Veterans' Home
Certificate #: 343600

Dear Ms. McGowen:

As a result of the Department of Human Services' licensing inspections on March 16, 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 black ink, appearing to read "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 03436 - 03/16/2017 - Heemer, Laura
 PCH Name: HOLLIDAYSBURG VETERANS HOME

1. REGULATION 55 Pa.Code §2600

2600.57(d) - At least 75% of the personal care service hours specified in § 2600.57(b) and § 2600.57(c) shall be available during waking hours.

2a. DESCRIPTION OF VIOLATION

On 3/12/2017, a total of 124 hours of direct care was required. However, only 91 (73%) of the required hours were provided during waking hours.

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.

See attached, page 2A of 3. -bc

Repeat Violation: No	Date(s) of Previous Violation(s):
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Arissa Rosemer, PCHA Emily Peckner, PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Arissa Rosemer, PCHA Emily Peckner, PCHA* Date *3/31/17*

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

The above plan of correction is approved as of 4/17/17
 (Date)

The above plan of correction was approved by *BRAS*
 (Initials)

Plan of correction implementation status as of 4/17/17
 (Date)

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

Hollidaysburg Veterans Home

License # 343600

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Regulation Cited: 2600.57(d)- At least 75% of the personal care service hours specified in 2600.57(b) and 2600.57(c) shall be available during waking hours.

How was the regulation violated: On 3/12/17, a total of 124 hours of direct care was required. However, only 91 (73%) of the required hours were provided during waking hours.

Benefit of the regulation: Ensures that staffing hours provided to meet personal care needs are supplied during a time of day when residents are awake.

Action plan to fix right away and prevent in the future: An error was made when administrators gave the census number, the correct Personal Care resident census was 70 and based off of the 70 Personal Care Residents on this day 75% of the staff hours needed during waking hours would have been 52.5hours. Our facility far exceeded the needed staffing hours at 91 hours from 7am-11pm.

54 of the 124 residents are Domiciliary Residents and they live on the ground floor of the facility. The remaining 69 residents live on the second floor, (one resident is considered a mobility need resident). According to the Chapter 21 Domiciliary Care Services 21.73 (a). Staffing, it states at least one provider or staff person shall be present and available on the premises when one or more clients are present in the home.

To calculate the proper amount of staffing hours will be based off of the current daily census. As census changes the scheduler will calculate the census and will input the number of residents into an excel spreadsheet that will calculate the proper amount of needed staff hours each day. The scheduling department will complete a schedule of employees showing the number staffing hours needed allowing compliance of this regulation.

Who is responsible for preventing future violation: Nursing Administration and Scheduler

Date corrected by: 3-16-17

Administrator Signature: Arissa Roemas

Date: 3/31/17

Administrator Signature: Emily Leckner

Date: 3/31/17

Violation Report: 03436 - 03/16/2017 - Heemer, Laura
 PCH Name: HOLLIDAYSBURG VETERANS HOME

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On 3/10/2017, Resident 1's blood sugar was tested and insulin was administered before lunch at approximately 11:45am. This blood sugar measurement and insulin administration was not documented in the Medication Administration Record.

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.

*See Attached, Page 3A + 3B
 of 3. -2e*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Miss Rosemarie PCHA Emily Reckner, PCHA</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	<i>Rosmarie PCHA Emily Reckner, PCHA</i>	Date	<i>3/31/17</i>
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 (Date)

The above plan of correction was approved by BRAS
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Plan of correction implementation status as of 4/17/17
 (Date)

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Regulation Cited: 2600.187(b)- The information in 2600.187(a)(13) and 2600.187(a)(14) shall be recorded at the time the medication is administered.

How was the regulation violated: On 3/10/17, resident's blood sugar was tested and insulin was administered before lunch at approximately 11:45 am. This blood sugar measurement and insulin administration was not documented in the medication administration Record.

Benefit of the regulation: Ensures MAR accuracy by minimizing the chances of documentation mistakes if a resident refuses a medication.

Action plan to fix right away and prevent in the future: The progress notes were reviewed from the date of the potentially missed medication and resident had no adverse effects. The physician was notified with no new orders. Residents' medication administration records were reviewed to ensure that the medication administration record contained entries in the appropriate blocks to indicate if the medications were administered.

The Medication Administration policy will be updated to include: medication administration record completion log will be signed after licensed staff have reviewed and ensured entries in the appropriate blocks to indicate if the medications were administered. All licensed nursing staff will be educated on the policy change by the Registered Nurse Instructors. See attached policy.

A random quality assurance review will be conducted by the Registered Nurse Supervisor and licensed staff who will review the medication administration record and the log at the end of the shift to ensure entries are in the appropriate blocks indicating if the medications were administered for one unit per shift, daily for four weeks, weekly for four weeks, then monthly for two months. The Quality Assurance/ Risk Management Coordinator or designee will conduct a random audit of the deficiency, biannually.

The results of the quality assurance review will be reported during the regularly scheduled Quality Assurance Committee meetings

Who is responsible for preventing future violation: Licensed Nursing Staff and the Registered Nurse Supervisor.

Arissa Thomas, RNHA

Emily Leekner, RNHA

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Date corrected by: 3/16/17

Administrator Signature: Arissa Holmes

Date: 3/31/17

Administrator Signature: Cheryl Baker

Date: 3/31/17