



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 16 2017

Mr. Brian Rendos,  
Treasurer  
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. Rendos:

As a result of the Department of Human Services' annual licensing inspection on September 19, 2017 of the above facility, the violation with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary was found.

The violation 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](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: 32842 - 09/19/2017 - Cargile, Kelle  
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

**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**

On 9/12/17 at 4:30 pm, Resident #1's medication administration record (MAR) was initialed by staff for a blood glucose reading. Neither the MAR nor the resident's glucometer contained a reading for this date and time.

On 9/15/17 at 6:30 am, the blood glucose reading on Resident #1's glucometer was 125. The resident's MAR for this date and time had a recorded reading of 124.

On 9/15/17 at 4:30 pm, the blood glucose reading on Resident #1's glucometer was 146. Resident #1's MAR indicated a reading of 127 for the corresponding date and time.

**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 because it reduces the risk that medications and medical equipment will be misplaced, lost or misused.
2. This regulation was violated because the glucometer was not used properly and documentation was incorrect.
3. The violation occurred because on 9/12/17 both the glucometer and MAR were missing a glucose reading, on 9/15/17 the glucose reading was 125 but documented as 124 and on 9/15/17 the glucometer reading was 146 but documented as 127.
4. Glucometer sheets were immediately implemented on 9/19/17 for each individual glucometer. These sheets are used at the time medical completes the glucose reading and can then be transcribed to MAR. Staff education regarding use of glucometers, glucometer sheets for each individual glucometer, weekly glucometer audits will be completed to be sure that glucometer readings match documentation in MAR, review of glucometer policy and procedure. Education to be complete (next pg) →

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. Maierhofer*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Melissa Maierhofer*

Date *10/19/17*

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

The above plan of correction is approved as of 10-23-17  
 (Date)

Plan of correction implementation status as of 10-23-17  
 (Date)

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

The above plan of correction was approved by BE  
 (Initials)

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Cont. # 4.

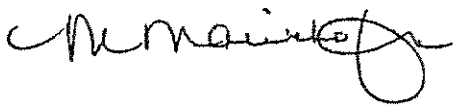
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by 10/30/17.

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5. To prevent future violations med tech's will use glucometer sheets with each glucometer to write glucose reading at the time the glucose is taken. Med tech will then refer to that sheet to transcribe glucose reading. Weekly glucometer audits will be completed to ensure glucose readings on glucometer match reading on the MAR. Med tech education as stated above to be complete by 10/30/17.
6. The administrator and medication technicians will be responsible for preventing future violations.

Melissa Maierhofer



10/19/17