



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 04 2018

Ms. Sharon L. Immler,
President
Morning Glory Senior Living, Inc.
419 North Queen Street
Littlestown, Pennsylvania 17340

RE: Morning Glory Senior Living
Certificate #: 312800

Dear Ms. Immler:

As a result of the Department of Human Services' Adult Residential Licensing's annual licensing inspections on October 24, 2017 and December 19, 2017 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,

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 31280 - 10/24/2017 - Springs, Israel
PCH Name: Morning Glory Senior Living

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

1. The MAR for Resident #1 documented a reading of 123 for 8:00 am on 10/13/17 and 150 for 8:00am on 10/16/17. The glucometer for Resident #1 did not contain measurements taken on these dates and times.

2. A comparison with the measurements stored in the glucometer for Resident #2 and the documented readings on the MAR identified the following documentation errors:

10/23/17 - 4:30 pm - glucometer: 128	MAR: 127
10/23/19 - 7:30 am - glucometer: 158	MAR: 155
10/08/17 - 7:30 pm - glucometer: no measurement	MAR: 200
10/07/17 - 4:30 pm - glucometer: no measurement	MAR: 180
10/01/17 - 7:30 AM - glucometer: 119	MAR: 109

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.

We have re-trained staff along as had a meeting directly after the violation & explained the violation to them. I also began a weekly glucometer check to pinpoint any errors ~~which~~ which will also show me which employee has made any errors. At that point they will be retrained too through the diabetic educator.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Cathy Frank*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Cathy Frank Administrator* Date *12-6-17*

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The above plan of correction is approved as of 12/7/17
(Date)

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

Plan of correction implementation status as of 12/28/17
(Date)

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

Violation Report: 31280 - 10/24/2017 - Springs, Israel

PCH Name: Morning Glory Senior Living

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Resident #2's MAR does not contain the diagnosis or purpose of the medication for the prescribed Metoprolol Tartrate 25mg.

Resident #2 has a current prescription for Citalopram 20 mg. Resident #2's MAR incorrectly documents Citalopram 40 mg.

Resident #3's MAR does not contain the diagnosis or purpose of the medication for the prescribed Aspirin EC 81 mg.

Resident #3 is prescribed Humalog Insulin on a sliding scale. The MAR for this resident does not document the amount of Humalog administered to the resident on 10/18/17 through 10/21/17 at 6:30 am.

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.

When the MARS come in from the pharmacy ~~at the~~ I am along with an employee [redacted] are going through them & checking them that all medications have correct dosage & purpose for medication. If it is not on MARS from pharmacy. I am contact of

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative

(Required on EVERY Page)

Cathy Frank

Printed Name and Title of Legal Entity Representative

(Required on EVERY Page)

Cathy Frank Administrator

Date

12-6-17

See next

Pg 3A

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Not Implemented

The above plan of correction was approved by

BAS
(Initials)

the pharmacy (Choice) to address this with them to ensure it is corrected by them as well. This check will be done on a weekly basis.

I have also updated my documentation of a sliding scale, I added a block where the staff administering the sliding scale insulins documents the amount of insulin given.