



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUN 28 2018

Ms. Erinn Sveda
Administrator
Watson Memorial Home
1200 Conewango Avenue
Warren, Pennsylvania 16365

RE: Watson Memorial Home
Certificate #: 444120

Dear Ms. Sveda:

As a result of the Department's Bureau of Human Services Licensing annual inspection on February 23, 2018, 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, appearing to read 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 44412 - 02/23/2018 - Winters, Lynn
PCH Name: WATSON MEMORIAL HOME

1. REGULATION 65 Pa.Code §2600
2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION
At approximately 10:05 AM, resident privacy coding documents that included the names of resident #1 and resident #2 were posted on the Licensing Inspection Summaries, dated 2/23/17 and 5/3/17, on the bulletin board around the corner from the administrator's office.

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. Bulletin board material has been inspected for any resident names or information. Any information regarding residents has been removed.

2. Administrator will be responsible for all documents hanging on the bulletin board. I will inspect all documents prior to being hung to ensure no resident information is on the documents and to ensure all resident information is very confidential.

3. No documents containing confidential resident information will be hung on the hallway bulletin board.

4. DON will be responsible for ensuring that all other resident records are not accessible to anyone other than the resident, resident's designated person, and staff persons providing services by conducting random weekly checks throughout the building where records are stored.

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)		Lynn Winters, Administrator	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date 4/16/18	

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The above plan of correction is approved as of <u>5/18/18</u> (Date)	Plan of correction implementation status as of <u>5/18/18</u> (Date)
The above plan of correction was approved by <u>BB</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented BB <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44412 - 02/23/2018 - Winters, Lynn
 PCH Name: WATSON MEMORIAL HOME

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
 Resident #3 is prescribed Ipratropium-Albuterol 0.5-2.5 SOLN - Inhale contents of one vial via nebulizer four times a day as needed for wheezing/SCB, however, the medication was not available in the home for administration.

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.

All medications and medication orders have been reviewed for all residents in the home. This review was conducted by the LPN's morning 2nd and 3rd shift. All medications that were low or out were found to be in the pharmacy and on hand in the home for administration.

2nd and 3rd shift LPN's will conduct a review of all medication orders and will ensure that all medications ordered are on hand. This review will be done for evening/night after the change each month.

LPN's will reorder medications when there are only eight doses left or will contact the physician to discuss discharging the order for any medications that a resident is no longer taking.

Resident #3's prescription for Ipratropium-Albuterol 0.5-2.5 SOLN was discontinued on 2/23/18.

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)	
Date	

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