



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 06 2018

Ms. Jessica Robbins
Administrator
Jah-Jireh Homes of America – Allentown
2051 Bevin Drive
Allentown, Pennsylvania 18103

RE: Legacy Place Cottages
License #: 225510

Dear Ms. Robbins:

As a result of the Department's Bureau of Human Services Licensing annual inspection on June 13, 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: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.25(c)(2) - The contract shall specify a fee schedule that lists the actual amount of allowable resident charges for each of the home's available services

2a. DESCRIPTION OF VIOLATION

Resident #1's contract dated 1/16/18 and resident #2's contract dated 5/7/18 does not include a fee schedule.

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.

- **Why is the regulation important?**

The contract shall specify a fee schedule that lists the actual amount of allowable resident charges for each of the homes available services.

- **How was the regulation violated, what caused the violation?**

The Costs and Fees schedule was included with the contract however, the second page that shows the Cost and Fee schedule for transportation and telephone charges were not included.

- **What can be done right away to fix the violation?**

The second page of the Costs and Fee schedule was added to the reviewed with resident and put in the resident's chart.

- **Who is responsible for preventing future violations?**

The Administrator and Wellness director will review the Cost and Fees schedule during the time of admission with the resident. Charts will be audited randomly to prevent missing documents.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Robbins

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

Jessica Robbins, Administrator

Date

7/26/18

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

The above plan of correction is approved as of

07/27/18
 (Date)

Plan of correction implementation status as of

07/27/18
 (Date)

The above plan of correction was approved by

JR
 (Initials)

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

Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.82(c) - Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

2a. DESCRIPTION OF VIOLATION

The bathroom of Room #206 contained a bottle of Listerine total care labeled "if swallowed get medical help or contact a poison control center immediately.

The bathroom of Room #208 contained a bottle of Renewal daily moisturizer and softsoap antibacterial handsoap labeled "if swallowed get medical help or contact a poison control center immediately.

The rooms are located in the homes secured memory care unit and the residents are not able to safely handle and identify poisonous materials.

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.

- **Why is the regulation important?**

Protects resident who are unable to safely use or avoid poisonous materials from illness, injury, or death related to misuse of accessible poisons.

- **How was the regulation violated, what caused the violation?**

The lotion and antibacterial soap were left out after being used in a resident's room. Both items normally are locked up but at the time were not. Keeping them locked up prevents danger to a resident and prevents calling poison control especially in our SMCU where residents are not able to identify poisonous materials

- **What can be done right away to fix the violation?**

*The lotion and antibacterial soap were locked back up at the time of the inspection. Each room has a locked medicine/mirror cabinet and also there is a locked closet in laundry room for overflow of poisonous products.
 The Wellness director along with staff on shift will check daily that all poisonous products are put away in lock cabinets.*

- **Who is responsible for preventing future violations?**

The Wellness director along with staff on shift will check daily that all poisonous products are put away in lock cabinets and will be responsible for preventing future violations.

The Administrator will oversee to ensure ongoing compliance. AG

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Robbins

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

Jessica Robbins, Administrator

Date *7/26/18*

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Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION

6 bags of tater tots, and a bag of fish were not labeled in the homes freezer.

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.

- **Why is the regulation important?**

Provides information regarding the identity of food items and the length of time food has been in storage, preventing cross-contamination of food and the use of expired food items.

- **How was the regulation violated, what caused the violation?**

The 6 sealed bags of tater tots, and a sealed bag of fish were taken out of the original box from food vendor but kitchen staff did not label/date the clear bags.

- **What can be done right away to fix the violation?**

During the inspection all tater tots and fish were labeled and dated. To prevent future violations the food will be keep in the original box or if taken out of the box for storage/space purposes it will be labeled and dated at the time.

- **Who is responsible for preventing future violations?**

To prevent future violations the food will be keep in the original box or if taken out of the box for storage/space purposes it will be labeled and dated at the time. The Chef and dietary staff will be responsible for preventing future violations.

The Administrator will oversee to ensure ongoing compliance. AG

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

Signature of Legal Entity Representative
 {Required on EVERY Page} *Jessica Robbins*

Printed Name and Title of Legal Entity Representative
 {Required on EVERY Page} *Jessica Robbins Administrator* | Date *7/26/18*

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Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.105(9)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION

The lint trap in the dryer of the laundry room located across from room #111 contained a handful of lint.

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.

- **Why is the regulation important?**

Greatly reduces the chance of fire in the home.

- **How was the regulation violated, what caused the violation?**

The washer and dryer were in use during the time of inspection. The employee took the comforter out of the dryer and into the resident's room located 3 doors up from laundry room. The employee did not clean the lint trap out before taking the comforter to the residents' room.

- **What can be done right away to fix the violation?**

During the time of the inspection the lint trap was cleaned out. After the dryer shuts off the lint trap will be cleaned out immediately to prevent the risk of fire.

- **Who is responsible for preventing future violations?**

The Wellness director and all staff will be responsible for checking and cleaning out lint traps in laundry rooms after each use.

The administrator will oversee to ensure ongoing compliance. AG

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Jessica Rabbin*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jessica Rabbin, Administrator*

Date *7/24/18*

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The above plan of correction is approved as of 07/27/18
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 (Initials)

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Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

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's PRN oxycodone with APAP was noted to be tampered with. Staff member A altered the narcotic count sheet to make it appear that the medication was administered more than it was. The medication was not administered by staff member A although the medications were missing from the blister pack.

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.

- **Why is the regulation important?**

Reduce the risk that medications and medical equipment will be misplaced, lost, or misused.

- **How was the regulation violated, what caused the violation?**

Even though the home has developed and implemented the procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons. At the time of the inspection the policy and procedure was not present to be shown even though it is followed. All steps were followed properly for the medication; however, the tampered medication was only proven due to a forged signature from another employee.

- **What can be done right away to fix the violation?**

The policy and procedures are implemented and copies were put back into the policy and procedure book. When a Med-Tech is trained the policy is taught and reviewed. The employee that tampered with the medication was terminated once the investigation was completed.

- **Who is responsible for preventing future violations?**

The Administrator along with the Wellness director will double check the med-cart, narc. sheets and communicate with staff at 7am. (random checks)

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 {Required on EVERY Page}

Jessica Robbing

Printed Name and Title of Legal Entity Representative
 {Required on EVERY Page}

Jessica Robbing, Administrator

Date

7/26/18

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07/27/18
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Violation Report: 22551 -06/13/2018- Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.191 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

2a. DESCRIPTION OF VIOLATION

Resident #1 and #2 has not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

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.

- **Why is the regulation important?**

Protects residents' right to refuse medication that they believe will be erroneously.

- **How was the regulation violated, what caused the violation?**

Even though during the time of a resident admission resident rights (right to refuse medication) is discussed this right was missing from the resident contract. During Medication Administration training Med-Techs are taught that our Residents have the right to refuse medication and how to properly document the refusal.

- **What can be done right away to fix the violation?**

The missing resident right (the right to refuse medication) was added to the resident contract. Resident #1 and #2 was educated on the right to refuse medications.

- **Who is responsible for preventing future violations?**

The Administrator is responsible for preventing future violations by double checking the resident contract that all rights are included. The Wellness director, who also is the medication trainer will also be responsible for educating a resident on the right to refuse medications.

Repeat Violation: Yes

Date(s) of Previous Violation(s): 06/21/2017

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Robbins

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

Jessica Robbins, Administrator

Date *7/24/18*

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Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

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 #2 was admitted to the home on 5/7/18, the home did not complete a pre-admission screening.

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.

- **Why is the regulation important?**

Ensures that the home can safely meet a resident's needs prior to admission.

- **How was the regulation violated, what caused the violation?**

The Prescreen was complete, however it was misplaced during the time of the inspection. The Prescreen coincides with the DME and RASP which were completed.

- **What can be done right away to fix the violation?**

The Prescreen was replaced and charts will be audit to prevent any important documents.

- **Who is responsible for preventing future violations?**

The Administrator along with the Wellness director will be responsible for making sure that the Prescreen is completed during the screening process before admission. The Prescreen will be placed in the resident's chart and double checked once admission is completed.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 {Required on EVERY Page}

Jessica Robbins

Printed Name and Title of Legal Entity Representative
 {Required on EVERY Page}

Jessica Robbins Administrator

Date *7/26/18*

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Violation Report: 22551 - 06/13/2018 - Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600

2600.225(a) -A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION

Resident #4's most recent RASP was completed on 1/2/18; the RASP from 2017 could not be located.

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.

- **Why is the regulation important?**

Allows homes to create a comprehensive profile of a resident's needs and serves as the basis for the plan to meet those needs.

- **How was the regulation violated, what caused the violation?**

2018 RASP was complete and followed. 2017 was completed within 72 after admission due to resident being admitted into SMCU, but misplaced during the time of inspection.

- **What can be done right away to fix the violation?**

2018 RASP is followed in placed in resident chart and also in RASP book located in SMCU book available for Caregivers to review to provide proper care. A list of all resident's RASP date will be followed as a check system and charts will be audited.

- **Who is responsible for preventing future violations?**

The Administrator will be responsible along with the Wellness director to double check dates and chart to prevent misplacement of RASP.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative

(Required on EVERY Page)

Jessica Rhine

Printed Name and Title of Legal Entity Representative

(Required on EVERY Page)

Jessica Rhine Administrator

Date

7/20/18

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07/27/18

(Date)

Plan of correction implementation status as of

07/27/18

(Date)

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Violation Report: 22551 -06/13/2018- Novak, Ryan
 PCH Name: LEGACY PLACE COTTAGES

1. REGULATION 55 Pa.Code §2600
 2600.252 - Each resident's record must include the following information: (1) through (26)

2a. DESCRIPTION OF VIOLATION

Resident #4's record did not include hair color or eye color.

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.

- **Why is the regulation important?**

Having a complete record for each resident gives the home the best possible picture of who the resident is, what the resident's history is, and what series or needs the resident may have.

- **How was the regulation violated, what caused the violation?**

A resident's factsheet is started after the prescreen is done. Once the resident is admitted the factsheet is completed that has all complete record information for the resident. The hair and eye were not added to the factsheet which caused the violations.

- **What can be done right away to fix the violation?**

The factsheet was updated during the inspection and to prevent future violations factsheets will be completed during admission to reassure the best possible picture who the resident is for all staff.

- **Who is responsible for preventing future violations?**

The Administrator along with the Wellness director will be responsible for completing the factsheet during the admission.

Repeat Violation: No

Date(s) of Previous Violation(s): T

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Robbins

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

Jessica Robbins, Administrator

Date *7/26/18*

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