



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 08 2018

Mr. Brian Rendos,
Chief Financial Officer
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's Bureau of Human Services Licensing's annual licensing inspection on July 17, 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 that reads "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 32842 - 07/17/2018 - Springs, Israel
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

Staff Member A did not have "Medication self-administration training" during training year 2017.

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 ensures that staff persons receive the necessary training to successfully provide essential resident care services.
2. This regulation was violated because staff member A did not have the "Medication self-administration training" during the training year 2017.
3. Typically staff member A would be trained immediately on "medication self-administration training". Staff member A no longer works at Epworth Manor PC.
4. To prevent further violations, the direct care staff yearly training schedule will be utilized for all direct care staff.
5. The Administrator will monitor and maintain the annual training for all direct care staff persons under the regulation 2600.65(f).

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Patti Stockley</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Patti Stockley Administrator</i>			Date <i>8/3/18</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of <u>8/6/18</u> (Date)		Plan of correction implementation status as of <u>8/6/18</u> (Date)	
The above plan of correction was approved by <u>BAS</u> (Initials)		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

Violation Report: 32842 - 07/17/2018 - Springs, Israel
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

1. REGULATION 55 Pa.Code §2600
 2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:
- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
 - (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
 - (3) Resident rights.
 - (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
 - (5) Falls and accident prevention.
 - (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION
 Staff Member A and Staff Member B did not have training in "Falls and accident prevention" during training year 2017.

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 ensures that all staff who work in the home are reminded of the home's emergency procedures and mandated reporting requirements.
2. This regulation was violated because Staff members A and B did not have the training in "Falls and accident prevention" during the training year 2017.
3. This violation was fixed my training staff member B of the "Falls and accident prevention" on 7/19/18. A record of training is attached. Staff member A no longer works at Epworth Manor PC.
4. To prevent further violations, the Direct care staff yearly training schedule and report will be utilized for all direct care staff.
5. The Administrator with monitor and maintain the annual training for all direct care staff under the regulation 2600.65(g).

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative *Patti Stockley*
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative *Patti Stockley Administrator* Date *8/3/18*
 (Required on EVERY Page)

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Violation Report: 32842 - 07/17/2018 - Springs, Israel
 PCH Name: EPWORTH HEALTHCARE AND REHABILITATION CENTER

1. REGULATION 55 Pa.Code §2600

2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

On 7/17/2018, the home only had the menu for the current week (7/15/2018- 7/21/2018) posted. The menu for 7/22/2018-7/29/2018 was not posted in advance.

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 having a menu that is prepared one week in advance and is followed is beneficial for residents so they can plan their meals in advance.
2. This regulation was violated because Epworth PC only had the menu for the current week posted. The menu for 7/22/18 - 7/29/18 was not posted in advance.
3. This violation was corrected immediately with inspector present. The menu was printed out and hung on the menu board with the menu dated 7/15/18 - 7/21/18.
3. To prevent this violation in the future, the dietary manager will post menus 1 week in advance in a conspicuous and public place.
4. The Administrator will monitor weekly to ensure that the menus are being posted.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Patti Stockley

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

Patti Stockley Administrator

Date *8/3/18*

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 (Date)

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 (Date)

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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
 Resident #1 was administered the prescribed Ipratropium inhaler 3ml (I-UD) nebulizer at 11:00am on 7/18/18. The staff person who administered this medication did not document the administration 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.

1. This regulation is important to ensure that the MAR accuracy by minimizing the chances of documentation mistakes if a resident refuses a medication.
2. This regulation was violated because the staff person who administered the medication did not document the administration of the medication in the Medication Administration Record.
3. This staff person did not initial in the MAR that she administered the medication to Resident 1.
4. The Medication Train the Trainer [REDACTED] re-educated the staff person of the importance of MAR documentation as related to the Medication Training Course on 7/18/18.
5. The designee/ Train the Trainer will monitor daily using the attached MARS Audit Report. The Administrator will monitor monthly that regulation 2600.187(b) is in compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Patti Stockley Administrator Date 8/3/18

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