



pennsylvania
DEPARTMENT OF HUMAN SERVICES

OCT 01 2018

Mr. Chuck Gray
Member
Senior Care of Kulpmont LLC
6157 28th Street SE, 7
Grand Rapids, Michigan 49546

RE: Serenity Gardens at Mount Carmel
135 Vermont Drive
Kulpmont, Pennsylvania 17834
License #: 226790

Dear Mr. Gray:

As a result of the Department's Bureau of Human Services Licensing annual inspection on August 2, 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: 22679 - 08/02/2018 - O'Haire, Anne
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

1. REGULATION 55 Pa.Code §2600

2600.105(g)(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

At 3:40 PM in the laundry room next to the dining area, lint was found in the filters of the dryers with no clothing in the units.

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.

Regulation 2600.105g1

1. To Prevent risk of fire hazard
2. Staff who do laundry will ensure lint trap is clean after each use
3. On duty housekeeping staff will audit daily

The administrator shall monitor and be responsible for ongoing compliance.

MM
9/17/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Kross LPN/DOW/PCHA

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

Jessica Kross LPN/DOW/PCHA

Date 9/13/18

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

The above plan of correction is approved as of 9/17/18
 (Date)

Plan of correction implementation status as of 9/17/18
 (Date)

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

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

Violation Report: 22679 - 08/02/2018 - OHaire, Anne
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(1) - A resident shall have a medical evaluation by a physician, physician's assistant, or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

2a. DESCRIPTION OF VIOLATION
 Resident # 1's DME was dated 01/22/18, Resident #1's date of admission was 04/26/18. Resident #1's DME was completed over 60 days prior to his/her admission into the facility and was not within the allowable time frames.

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.

Regulation 2600.141a1

1. To ensure resident's needs can be properly met
2. Admission will ensure medical evaluation date is within 60 days prior/after admission date
3. Director of Wellness and Administrator will oversee

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Jessica Kross LPN/DOW/PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jessica Kross LPN/DOW/PCHA</i>	Date <i>9/13/18</i>
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Violation Report: 22679 - 08/02/2018 - O'Haire, Anne
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION

Resident #2's DME dated 11-13-17 was not complete. The DME did not have the resident's medications listed or attached, resident's immunizations were not addressed and his /her ability to manage medications was not addressed.

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.

Regulation 2600.141a2

1. To ensure residents needs can be properly met by the facility
2. Director of Wellness will ensure that the DME is fully completed
3. Administered will oversee

MM

The administrator shall monitor and be responsible for ongoing compliance. 9/17/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jessica Kross LPN/DOW/PCNA

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

Jessica Kross LPN/DOW/PCNA

Date

9/13/18

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Violation Report: 22679 - 08/02/2018 - O'Haire, Anne
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

1. REGULATION 55 Pa.Code §2600

2600.171(c) - The home shall maintain current copies of the following documentation for each of the home's vehicles used to transport residents:

- (1) Vehicle registration.
- (2) Valid driver's license for each vehicle operator.
- (3) Vehicle insurance.
- (4) Current inspection.
- (5) Commercial driver's license for vehicle operator if applicable.

2a. DESCRIPTION OF VIOLATION

The home's vehicle registration that was on hand had an expiration date of 07-30-18. The home reported that the home's main office maintains that information, but the home is required to have an owners card available in the vehicle in the event of an emergency. No updated owners card was provided prior to leaving the facility.

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.

Regulation 2600.171c

- 1. To ensure the home's vehicle follows Pennsylvania's traffic codes
- 2. Van driver will perform monthly audit to ensure all documents are maintained and report to Maintenance Director
- 3. Maintenance Director will record the dates of registration and oversee proper documentation is maintained by making necessary appointments

The administrator shall monitor and be responsible for ongoing compliance. MM
9/17/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
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Jessica Kross LPN/DOW/PCMA

Printed Name and Title of Legal Entity Representative
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Jessica Kross LPN/DOW/PCMA

Date

9/13/18

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Violation Report: 22679 - 08/02/2018 - O'Haire, Anne
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

1. REGULATION 55 Pa.Code §2600

2600.231(c) - A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

2a. DESCRIPTION OF VIOLATION

Resident #3's cognitive screening form was incomplete; no Dementia diagnosis was listed on the prescreening document and the cognitive screening section of the form was not completed. Resident #3 resides on the secured unit and this section must be completed by a physician or Geriatric assessment team prior to the resident's admission.

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.

Regulation 2600.231c

1. To ensure the home can best meet the cognitive needs of the residents
2. Admissions will ensure the cognitive prescreening is fully completed before moving resident into SDU
3. Director of Wellness and Dementia Care Coordinator will oversee

Repeat Violation: No

Date(s) of Previous Violation(s):

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Jessica Kross LPN/DOW/PCNA

Printed Name and Title of Legal Entity Representative
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Jessica Kross LPN/DOW/PCNA

Date *9/13/18*

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