



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 20 2018

Mr. Sandy Insalaco Jr.
President
Maple Shade Meadows LP
490 North Main Street
Pittston, Pennsylvania 18640

RE: Maple Shade Meadows Senior Living
50 East Locust Street
Nesquehoning, Pennsylvania 18240
License #: 204000

Dear Mr. Insalaco:

As a result of the Department's Bureau of Human Services Licensing annual inspection on July 27, 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: 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Code §2800

2800.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION

The licensing inspection summary dated 2/14/18 was not posted in a public conspicuous place in the home.

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.

The Licensing Inspection Report dated 2/14/18 was not posted in a public area. It was immediately corrected during the Annual Inspection. The Inspection Report was posted in the front vestibule entrance of the building observed by Ms. Novak (LHS).
Moving forward all current Inspection Reports will be posted in a public area (front vestibule entrance). Executive Director will closely monitor to ensure future compliance.

Melanie Goodman Executive Director 8/3/18

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Sandy Insalaco Jr. President Date 8-3-18

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

The above plan of correction is approved as of 8-9-18 (Date)

Plan of correction implementation status as of 8-9-18 (Date)

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

The above plan of correction was approved by *[Signature]* (Initials)

Violation Report 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa. Code 52600

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

The resident privacy coding document was attached to the licensing inspection summary dated 7/17/17 posted on the home's bulletin board. The privacy coding document exposes confidential information of the residents.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Includes 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.

The privacy statement with resident information regarding Licensing Inspection dated 7/17/17 that was posted in the front vestibule entrance was immediately removed during the Annual Inspection observed by Ms. Novak (DHS).

Moving forward the Executive Director will closely monitor reports to ensure future compliance

Melanie Hernandez Executive Director 8/3/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

[Signature]

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

Sandy Insalaca Jr President

Date 8-3-18

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The above plan of correction is approved as of

8/9/18
(Date)

Plan of correction implementation status as of

8/9/18
(Date)

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[Signature]
(Initials)

08/03/2018 12:09

(FAX)

P.007/013

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCK Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 86 Pa.Code §2800
2800.82(e) - Poisonous materials shall be stored in their original, labeled containers.

2a. DESCRIPTION OF VIOLATION
2 spray bottles labeled bleach and 118 cleaner were located in the laundry room. The original manufacturer's label was not attached to the bottles.

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.

The spray bottle of bleach was immediately removed from the laundry and discarded. The spray bottle containing 118 cleaner was removed. A new container of 118 cleaner was obtained with the manufacturer's labeling and description for use in the laundry area. All staff were educated to importance of cleaning products being properly labeled and used.

Moving forward Maintenance Director and Executive Director will closely monitor to ensure future compliance. Please refer to attached pictures Yes

Melanie Goodner Executive Director 8/3/18

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

Signature of Legal Entity Representative (Required on EVERY Page) *Sandy Insalaco*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Sandy Insalaco, JR. President Date 8-3-18

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCN Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 66 Pa.Code §2600
2600.82(b) - Poisonous materials shall be stored separately from food, food preparation surfaces and dining surfaces.

2a. DESCRIPTION OF VIOLATION
A bag of chips was stored in the activities closet of the memory care unit. The bag of chips was located next to 2 bottles of spic n span cleaner and 3 bottles of handclens foaming sanitizer.

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.

The cleaning products were immediately removed from the activities storage closet and locked. Moving forward all cleaning products will be stored and locked under the sink area cabinet. All staff was educated to same. Dementia Program Director and Executive Director will closely monitor to ensure future compliance

Melanie Goodman Executive Director 8/3/18

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
Sandy Insalaco, JR. President 8-3-18

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

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 following poisons labeled "if swallowed contact a poison control center or doctor immediately was unlocked and accessible in the homes memory care unit in the activities closet: 2 bottles of spic n span everyday, 3 bottles of handclens foaming sanitizer, 2 bottles of palmolive dish soap and a container of hand and face wipes.

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.

The cleaning supplies were immediately removed from the Activities storage closet and locked. The cleaning supplies were placed and locked under the sink area. All staff were educated to the importance of all poisonous materials must be in a locked area. Moving forward the Dementia Program Director and Executive Director will be closely monitoring to ensure future compliance.

Nelasia Goodman, Executive Director 8/3/18

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Sandy Insalaco, Jr. President* Date *8.3.18*

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Coda 52600
2800.65(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
On 7/19/18 at 8am Resident #1's glucometer was used to test Resident #2's blood glucose.

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.

Resident #1 and Resident #2 mb's were immediately notified of incident. Both glucometers were disposed and new glucometers obtained. Monitors and cases were labeled with resident's name and room number. All staff were educated regarding importance of same and maintaining sanitary conditions. Moving forward Resident Care Director and Executive Director will closely monitor to ensure future compliance. Please refer to attachments.

Melanie Goodnow Executive Director 8/3/18

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) Date
Sandy Insalaco, JR. President 8-3-18

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08/03/2018 12:10

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P.011/013

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa. Code §2800

2800.184(a) - The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

- (1) The resident's name.
- (2) The name of the medication.
- (3) The date the prescription was issued.
- (4) The prescribed dosage and instructions for administration.
- (5) The name and title of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #5's humalog expired 7/16/18.

Resident #1's humalog expired 7/14/18.

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.

Insulin of Resident #1 and #5 were found expired. The Insulin was immediately discarded. Mrs's of both Residents were notified and new Insulin obtained. All medication staff were re-educated regarding proper labeling of meds and checking for expiration dates on a daily basis.

Moving forward the Resident Care Director and Executive Director will closely monitor to ensure future compliance.

Melanie Goodner, Executive Director 8/3/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
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Sandy Insalaco, Jr.

Printed Name and Title of Legal Entity Representative
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Sandy Insalaco, JR. President

Date 8.3.18

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Violation Report: 20400 - 07/27/2018 - Novak, Ryan
PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 65 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 & #4's glucometers were not calibrated to the correct date and time.

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.

Glucometers of Resident's #3 and #4 were reprogrammed per manufacturer's direction to the correct date and time. All medication staff were re-educated regarding same to verify at time of testing Resident's blood sugar.

Moving forward Resident Care Director and Executive Director will closely monitor to ensure future compliance.

Melanie Goodman, Executive Director 8/3/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Sandy Insalaco, Jr

Printed Name and TITLE of Legal Entity Representative
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Sandy Insalaco, JR President

Date 8.3.18

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