



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 10 2019

Ms. Michele Moser
Administrator
Renaissance Home Northampton LLC
1001 Washington Avenue
Northampton, Pennsylvania 18067

RE: Renaissance Home Northampton
License #: 227010

Dear Ms. Moser:

As a result of the Department's Bureau of Human Services Licensing annual inspection on September 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
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

PCH Name: RENAISSANCE HOME NORTHAMPTON		License Number: 22701
Address: 1001 WASHINGTON AVENUE, NORTHAMPTON, PA 18067		County: Northampton
Administrator: Michele Moser		Region: NORTHEAST
Legal Entity Name: RENAISSANCE HOME NORTHAMPTON LLC		
Legal Entity Address: 1001 WASHINGTON AVENUE, NORTHAMPTON, PA 18067		
Certificate(s) of Occupancy		
C-2 LP 12/01/1995 L&I	Other 01/22/1998 Borough of Northampton	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 58	Waking Staff: 44
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
09/27/2018: Harvey, Jason, Dumas, Gerald		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 60 Number of Residents Served: 49 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 5	Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 48 Have Mental Illness: 4 Have an Intellectual Disability: 1 Have a Mobility Need: 9 Have a Physical Disability: 1	

Violation Report: 22701 - 09/27/2018 - Harvey, Jason
 PCH Name: RENAISSANCE HOME NORTHAMPTON

1. REGULATION 55 Pa.Code §2600
 2600.92 - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

2a. DESCRIPTION OF VIOLATION
 Gorilla tape was not secured sufficiently around a window vented air conditioner. The small 2-inch opening allowed the risk of insects/rodents to enter the home via the window air conditioner duct vent. This was observed twice at approximately 10:10 a.m. and later the same morning.

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.

Maintenance constructed a permanent wood insert that fits snugly in the window frame when you close the window down on it. The hole was cut out to exactly fit the opening where the air conditioning venting goes out, and it was caulked around it as well so nothing could get in around it. This way will no longer have to worry about it becoming dislodged & maintenance will check it daily to ensure there are no spaces opening anywhere for ongoing compliance.

(See Attachment #1) *(when in use during summer)*

YES

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) *Administrator - Michele Moser* Date *11/2/18*

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

The above plan of correction is approved as of <u>11-7/18</u> (Date)	Plan of correction implementation status as of <u>11-7-18</u> (Date)
The above plan of correction was approved by <u>AG</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: 22701 - 09/27/2018 - Harvey, Jason
 PCH Name: RENAISSANCE HOME NORTHAMPTON

1. REGULATION 55 Pa.Code §2600

2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

From the "Home side" emergency exit, residents and staff during fire drills are directed to evacuate to the external fire safe area away from the home. The current path is a grassy incline which presents a potential of slipping hazard during inclement weather conditions. Additionally, a handrail is also not provided to safely navigate down the incline to the external fire safe area.

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.

We will be having a contractor come and build a new pressure treated wooden ramp and landing system. There will be a side walk from ramp landing to existing concrete walk that will connect into existing concrete walks. There will be handrails to safely navigate down the ramp system.
 The area now (exists) will exit onto a level area instead of an incline which will be much safer for residents as well

See attachments #1 + #2 YES

*The Administrator will send digital photos upon completion of the work to demonstrate compliance. 11-7-18 *AG*

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Michelle Noser, Administrator</i>	Date <i>11/2/18</i>
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Violation Report: 22701 - 09/27/2018 - Harvey, Jason
 PCH Name: RENAISSANCE HOME NORTHAMPTON

1. REGULATION 55 Pa.Code §2600
 2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION
 The home's 2 emergency exit doors located on the side street side of the home, were difficult to open. The lower portion of the emergency metal door appeared to have some rust and rubbed the bottom portion of the floor plate making the door difficult to open.

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 3 doors that exit out the side street side were painted/repainted. The automatic door closures were greased and the internal mechanisms were also loosened with a screwdriver which allowed the doors to open easily. (see attachments # 1, 2 + 3) YES

Maintenance will check the doors monthly on the same days we do fire drills to ensure that they open up easily to exit out. to ensure on going compliance.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Michele Moser, Administrator	Date 11/2/18
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Violation Report: 22701 - 09/27/2018 - Harvey, Jason
PCH Name: RENAISSANCE HOME NORTHAMPTON

1. REGULATION 55 Pa.Code §2600

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

A floral seat cushion was found on a love seat which was located within the home's designated smoking area. The seat cushion did not have a tag to indicate that the cushion was made of non-flammable material.

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 seat cushion was immediately removed from the bench which was located within the designated smoking area.

A sign was posted to alert all Residents, staff and visitors that no cushions or other combustibles are allowed in designated smoking area.

Maintenance will check smoking area daily to ensure ongoing compliance.

See Attachment # 1 YES

*The Administrator will make periodic observations of the home's smoking area to ensure ongoing compliance. 11-7-18

AG

Repeat Violation: No

Date(s) of Previous Violation(s):

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(Required on EVERY Page)

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

Michele Moser, Administrator

Date 11/2/18

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(Date)

Plan of correction implementation status as of 11-7-18
(Date)

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(Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 22701 - 09/27/2018 - Harvey, Jason
 PCH Name: RENAISSANCE HOME NORTHAMPTON

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 #1's True Metrix glucometer was 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.

Resident #1's true Metrix glucometer was calibrated to the correct date and time

All the proper solutions were purchased and the other Resident's Machines were calibrated as well.

Director of Wellness will check the glucometers weekly to ensure they are calibrated to ensure ongoing compliance.

(See Attachment #1) YES

*The Administrator will oversee this Plan of Correction to ensure ongoing compliance. 11-7-18

AG

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Michelle Wiser, Administrator Date 11/2/18

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Violation Report: 22701 - 09/27/2018 - Harvey, Jason
 PCH Name: RENAISSANCE HOME NORTHAMPTON

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Resident #1's Medication Administration Record did not include the medication Vitamin D3 2000u.

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's medication Vitamin D3 2000u tab was put on the MAR immediately after the finding of it not included. (see attach #1)
 Ddw will check MAR's on a weekly basis to ensure ongoing compliance & will check in All MAR's with medications at the beginning of new monthly cycle fill as well.

*The Administrator will oversee this Plan of Correction in order to ensure ongoing compliance. 11-7-18 AG

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