



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 15 2019

Ms. Janine Kurasko-Starinsky
Executive Director
Premier Oakwood Terrace Operating LLC
245 Park Avenue, 39th Floor
New York, New York 10167

RE: Oakwood Terrace
400 Gleason Drive
Moosic, Pennsylvania 18507
License #: 226610

Dear Ms. Kurasko-Starinsky:

As a result of the Department's Bureau of Human Services Licensing annual inspection on November 8, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report 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 "Jacqueline L. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 22661 - 11/08/2018 - Harvey, Jason
PCH Name: OAKWOOD TERRACE

1. REGULATION 55 Pa.Code §2600
2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION
Resident room # B-3 with one resident had a bedside lamp that was not functional.

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.
A new lightbulb was placed into the bedside lamp on 11/8/2018. The housekeepers was instructed to check every lamp daily to ensure that it is working properly. Documentation of lamp checking will be recorded in Caretrackers daily.

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

Signature of Legal Entity Representative
(Required on EVERY Page) JANINE KUBASKO-STARINSKI

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Date 01-18-2019

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

The above plan of correction is approved as of 2-22-19
(Date)

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

Plan of correction implementation status as of 2-22-19
(Date)

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

Violation Report: 22661 - 11/08/2018 - Harvey, Jason
 PCH Name: OAKWOOD TERRACE

1. REGULATION 55 Pa.Code §2600
 2600.103(i) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

1 large bag of chopped lettuce approximately 2 pounds was not and was not labeled or dated located in the main walk in refrigerator.

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.

On 11/8/2018, the bag was sealed and dated. All dietary staff were instructed to place a sticker on the opened food item, identify the item and date it. The dietary director or cook will monitor daily that this is completed.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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 (Required on EVERY Page) JANINE KUBASKO-STARINSKY

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>[Signature]</u>	Date <u>01-19-2019</u>
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Violation Report: 22661 - 11/08/2018 - Harvey, Jason
 PCH Name: OAKWOOD TERRACE

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 is prescribed Robitussin as needed. On 11/8/19 the medication was not available 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 medication was ordered and delivered by the pharmacy on 11/18/2018. Staff educated to re-order medications prior to depleting supply and document on pharmacy order form. When order is delivered, the staff receiving the medication is to check off on the order form that medication was received. If not, they need to follow through with pharmacy regarding ordered medication. The pharmacy receipt will be stapled to the pharmacy order form. The Health & Wellness Director will monitor that this is being completed.

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Violation Report: 22661 - 11/08/2018 - Harvey, Jason
PCH Name: OAKWOOD TERRACE

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

The Medication Administration Record for resident #2 and #3 did not indicate a dosage for Senokot.

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 correct dosage was added to the MAR for resident 2. However, Senokot was discontinued for resident #3 by the physician for medical reasons. Staff instructed and retrained that the dosage of the medication must be indicated on the MAR. Health and Wellness Director will monitor and perform weekly audits to ensure accuracy.

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