



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 17 2019

Ms. Sherry Hill
Administrator/Designee
Moravian Union of King's Daughters & Sons of Bethlehem PA
61 West Market Street
Bethlehem, Pennsylvania 18018

RE: Moravian King's Daughters & Sons Home
License #: 242140

Dear Ms. Hill:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 11, 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,

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 24214 - 12/11/2018 - Foulkes, Kimberli
 PCH Name: MORAVIAN KING S DAUGHTERS AND SONS HOME

1. REGULATION 55 Pa.Code §2600
 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
 A folder which contained physician notes and various information regarding resident's prescriptions was found in an unlocked drawer of the Med Tech area. This zone is accessible to unauthorized persona and residents as it is considered a 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.

The notebook for Physician's information is kept in a lock cabinet. The med-techs have been trained again on regulation 2600.17 regarding all residents information must be maintained in a confidential manner. That includes information on residents cannot be left in common areas such as top of cabinet surfaces, med cart, unlocked cabinets, etc. The administrator is responsible for monitoring adherence to regulation 2600.17.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Sherry Hill, Admin.</i>	Date <i>3/7/19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3-28-19</u> (Date)	Plan of correction implementation status as of <u>3-28-19</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: 24214 - 12/11/2018 - Foulkes, Kimberli
 PCH Name: MORAVIAN KING S DAUGHTERS AND SONS HOME

1. REGULATION 55 Pa.Code §2600
 2600.28(f)(2) - Refunds shall be made within 30 days of the resident's discharge.

2a. DESCRIPTION OF VIOLATION
 Resident #1 was discharged from the home on 08/30/2018 and was to receive a \$90 refund. The home did not have documentation that a refund was issued. It could not be determined that a refund was issued within 30 days of discharge.

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 refund for resident #1 was issued on 12/13/18, check #5939 for \$90.00. The board treasurer has been trained in the urgency of refunds being returned within 30 days of discharge. The attached form is used by the administrator for notifying the board treasurer of refund. The administrator is responsible for the follow through of all refunds.

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
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Violation Report: 24214 - 12/11/2018 - Foulkes, Kimberli
 PCH Name: MORAVIAN KING S DAUGHTERS AND SONS HOME

1. REGULATION 55 Pa.Code §2600
 2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home's notification to the local fire department did not include the total capacity of 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 letter has been resubmitted to the fire department with the total capacity of the home included in the letter. See attached letter.

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Sherry Hill	3/7/19

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Violation Report: 24214 - 12/11/2018 - Foulkes, Kimberli
 PCH Name: MORAVIAN KING S DAUGHTERS AND SONS HOME

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 #2 was medically evaluated on 02/05/2018 and admitted to the home on 04/19/2018. Resident was not medically evaluated within 60 days prior to admission date.

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.

This resident's admission was delayed due to the daughter having difficulty placing her parent because of the bond she had with her mother. Med-techs have been retrained in the medical evaluation requirement of 60 days prior to admission and 30 days after admission. The administrator and midnight shift med- tech will be responsible for monitoring assessments and medication evaluations for the required time frames.

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Violation Report: 24214 - 12/11/2018 - Foulkes, Kimberli
 PCH Name: MORAVIAN KING S DAUGHTERS AND SONS HOME

1. REGULATION 55 Pa.Code §2600

2600.190(b) - A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

2a. DESCRIPTION OF VIOLATION

On 12/01/18 between 7pm-7am there was no diabetic trained staff working. There is a resident in the facility who requires Diabetic care.

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.

Med-Tech on duty on 12/01/18 had diabetic training but the training was not current. She is being retrained with all med-techs on March 19, 2019. The resident involved is not insulin dependent and his diabetes is stable. The Administrator will be responsible for ensuring the required training for all positions including med-techs.

The Administrator will submit the training documentation for CDE Diabetic Approved Training to the Northeastern Regional Office upon receipt of said training. This submission will include a copy of the CDE's current training certificate. 3-28-19

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