



MAILING DATE: October 4, 2019

Ms. Leslie McKinney
Administrator
Sugar Creek Rest, Ltd.
109 Personal Care Lane
Worthington, Pennsylvania 16262

RE: Quality Life Services - Sugar Creek
Certificate #: 426810

Dear Ms. McKinney:

As a result of the Department's Bureau of Human Services Licensing inspection on March 3, 2019, of the above facility, the citations 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.

Sincerely,

A handwritten signature in black ink that reads "Suzy Quinn". The signature is written in a cursive style with a large, looped "S" and a long, sweeping underline.

Suzy Quinn
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *QUALITY LIFE SERVICES SUGAR CREEK*
Address: *109 PERSONAL CARE LANE, WORTHINGTON, PA 16262*
County: *ARMSTRONG* Region: *WESTERN*

License Number: *426810*

Administrator

Name: *Leslie McKinney* Phone: *7244452863* Email: *Mckinneyc169@yahoo.com*

Legal Entity

Name: *SUGAR CREEK REST LIMITED PARTNERSHIP*
Address: *109 PERSONAL CARE LANE, PA, 16262*

Certificate(s) of Occupancy

Type: *I-2* Date: Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *25* Waking Staff: *19*

Inspection

Type: *Partial* BHA Docket #: Notice: *Unannounced*
Reason: *Incident*

Inspection Dates and Department Representative

03/11/2019 - On-Site: Jody Garvey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *47* Residents Served: *19*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *18*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *6* Have Physical Disability: *0*

183d - Prescription Current

Regulations

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

There was a bottle of Robafen DM syrup with a pharmacy label indicating-give 2 teaspoons by mouth every 6 hours as needed for cough in resident #1's medication cart. However, the medication was not a current prescription and was not on the resident's March 2019 medication administration record (MAR).

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.)

See page 2a of 6

Legal Entity Representative



Signature

Collin George
Printed Name and Title

9/30/19
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 10/3/19
(Date)

Plan of correction implementation status as of 10/3/19
(Date)

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

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

PG. 2 of 6

All medications not on the MAR were removed immediately. The med carts will be audited monthly to ensure only meds on the MAR are in the med cart by PCA or designee and that orders and MAR match.

Documentation of the audit shall be kept. *SE* 10/3/19

Within 30 days of receipt of the plan of correction: All staff qualified to administer medication shall be re-educated that only current prescription, OTC, sample and CAM for individuals living in the home are to present in the home and upon the prescriber's discontinuance of a resident medication, the home shall immediately cease administrating, remove from the MAR and dispose of the medication in accordance with §2600.183.f. *SE* 10/3/19

CLH 9/30/19

184a - Labeling OTC/CAM

Regulations

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

- 4. The prescribed dosage and instructions for administration.

Description of Violation

Resident #1 was prescribed Albuterol Sulfate nebulization solution 2.5 mg/3ml 0.083%- inhale 1 vial orally via nebulizer at bedtime and every 6 hours as needed. However, the pharmacy label on the medication indicated Albuterol Sulfate nebulization solution 2.5 mg/3ml 0.083%- inhale 1 vial orally via nebulizer four times daily.

Plan of Correction (POC)

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See page 3a of 6

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PG. 3 of 6

The order was clarified and the medication label was changed to match the order and the MAR as of 7/9/19. The med carts will be audited monthly to ensure only meds on the MAR are in the med cart by PCA or designee and that orders and MAR match.

The monthly audits shall be completed a designated staff person qualified to administer medication. The designee shall audit prescription medications to ensure they are stored in their original container and labeled with a pharmacy label that includes the resident's name, the name of the medication, the date the prescription was issued, the prescribed dosage, instructions for administration and the name and title of the prescriber. The pharmacy label and the MAR shall be compared to the prescriber's order. Any discrepancies shall be verified with the prescriber and immediately corrected. Documentation of the audits shall be kept.

 10/3/19

 9/30/19

187a - Medication Record

Regulations

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

- 10. Duration of therapy, if applicable.

Description of Violation

On 3/1/19, resident #1 was prescribed Ceftin 500 mg tab- give 1 tablet by mouth two times a day for 7 days. However, the resident's March 2019 MAR indicated Ceftin 500 mg tab beginning 3/1/19 - give 1 tablet by mouth two times a day for treatment until 3/14/19.

Plan of Correction (POC)

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See page 4a of 6

Legal Entity Representative


Signature

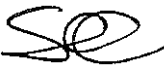
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PG. 4 of 6

All staff educated to ensure orders are entered accurately into the system. All staff educated on the need to administer medications as ordered and that MAR and order must match. Medication no longer being given. Finished and discontinued in 3/8/19. The med carts will be audited monthly to ensure only meds on the MAR are in the med cart by PCA or designee and that orders and MAR match.

The monthly audits shall be completed a designated staff person qualified to administer medication. The designee shall audit prescription medications to ensure they are stored in their original container and labeled with a pharmacy label that includes the resident's name, the name of the medication, the date the prescription was issued, the prescribed dosage, instructions for administration and the name and title of the prescriber. The pharmacy label and the MAR shall be compared to the prescriber's order. Any discrepancies shall be verified with the prescriber and immediately corrected. Documentation of the audits shall be kept.

 10/3/19

 9/30/19

187b - Date/Time of Medication Admin.

Regulations

2600.

187.b. The information in subsection 2600.187a(13) and 2600.187a(14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1's March 2019 MAR does not include the initials of staff administering the following medications on 3/3/19:

*Ceftin 500 mg tab-give 1 tablet by mouth 2X a day for 7 days - 2nd administration

*Albuterol Sulfate nebulization solution 2.5 mg/3ml 0.083%- inhale 1 vial orally via nebulizer at bedtime

*Melatonin tablet 3 mg- give 1 tablet by mouth at bedtime

*Miralax packet 3350-give 1 packet by mouth at bedtime

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PG. 5 of 6


All Staff educated that they must initial medications that are given on the MAR and all medications are to be given as ordered by a physician. The med carts will be audited monthly to ensure only meds on the MAR are in the med cart by PCA or designee and that orders and MAR match.

The monthly audits shall be completed by a staff person qualified to administer medication. The designee shall audit all resident MARs to ensure the date and time of medication administration and the name and initials of the staff person administering the medication are properly documented. Documentation of the audits shall be kept.

 10/3/19

Immediately, and at least once per week for two months and monthly thereafter: The administrator shall observe medication passes and documentation of passes for all staff administering medication. Observation shall include comparing medications administered to the resident MAR to ensure all resident medications are administered according to the orders of the prescriber and properly documented on the MAR. Documentation of the audits shall be kept.

 10/3/19

 9/30/19

187d - Follow Prescriber's Orders

Regulations

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 was prescribed Ceftin 500 mg tab- give 1 tablet by mouth 2X a day for 7 days. On 3/7/19, Staff person A indicated the medication was only administered 1X due to the evening medication card being empty and the staff person did not check the morning medication card. On the morning of 3/8/19, the final dose of the medication was administered.

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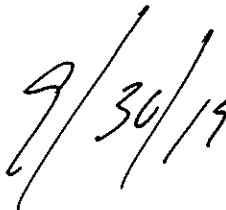
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PG. 6 of 6

All staff educated on the need to administer medications as ordered and that MAR and order must match. Medication no longer being given. Finished and discontinued in 3/8/19. . The med carts will be audited monthly to ensure only meds on the MAR are in the med cart by PCA or designee and that orders and MAR match.

The monthly audits shall be completed a designated staff person qualified to administer medication. The designee shall audit prescription medications to ensure they are stored in their original container and labeled with a pharmacy label that includes the resident's name, the name of the medication, the date the prescription was issued, the prescribed dosage, instructions for administration and the name and title of the prescriber. The pharmacy label and the MAR shall be compared to the prescriber's order. Any discrepancies shall be verified with the prescriber and immediately corrected. Documentation of the audits shall be kept.

 10/3/19

Immediately, and at least once per week for two months and monthly thereafter: The administrator shall observe medication passes and documentation of passes for all staff administering medication. Observation shall include comparing medications administered to the resident MAR to ensure all resident medications are administered according to the orders of the prescriber and properly documented on the MAR. Documentation of the audits shall be kept.

 10/3/19