



pennsylvania
DEPARTMENT OF HUMAN SERVICES

November 21, 2019

Mr. Peter Pachuski
Secretary
Emmanuel Home
800 Priestly Avenue
Northumberland, Pennsylvania 17857

RE: Emmanuel Home
License # 200530

Dear Mr. Pachuski:

As a result of the Department's Bureau of Human Services Licensing annual inspection on March 13, 2019 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, appearing to read "Kevin Hancock".

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
Violation Report

Violation Report: 20053 - 03/13/2019 - Deluca, Amy
 PCH Name: EMMANUEL 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
 The Licensing inspection summary posted on the bulletin board dated 3/22/18 had the resident privacy coding document attached. The privacy coding document exposes the resident's confidential information.

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.

See attached

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Delbo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Robert J. Delbo, Administrator</i>	Date <i>4-4-19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 4-19-19
 (Date)

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

Plan of correction implementation status as of 4-19-19
 (Date)

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

Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

April 4, 2019

Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa.Code – 2600 – 17**

1. **Why is the regulation important?** To ensure PCH comply with State regulations pertaining to confidential records. That all records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the residents designated person, staff for purposes of providing services, agents from DHS, the Ombudsman, POA, or Health Care Provider.
2. **How was the regulation violated?** Regulation was violated by not removing the resident's name from a copy of the posted violation.
3. **What caused the violation?** The cause of the violation was an oversight of removing the resident's name from the posted violation.
4. **What can be done right away to fix the violation?** Violation was corrected at the time of the DHS site visit by removing the last sheet with the resident's name from the posted violation report.
5. **What can we do to prevent future violation?** Make sure all names are removed from all violations prior to posting.
6. **Who will be responsible for preventing future violation?** Robert J. Delbo, Administrator.

Signature of Legal Entity Representative

Robert J. Delbo

Printed Name and Title of Legal Entity Representative

Robert J. Delbo, Administrator

Date 4-4-19

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy

PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600

2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

A carbon monoxide detector was not installed at least 15 feet from the home's 3 gas fired dryers as required by the Care Facilities Carbon Monoxide Standards Act.

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.

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Delbo*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Delbo, Administrator* Date *4-4-19*

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Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

April 3, 2019

Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa.Code – 2600 – 18**

1. **Why is the regulation important?** To ensure PCH comply with applicable Federal, State and local laws, ordinances and regulations. According to these regulations a carbon monoxide detector must be installed at least 15 feet from any gas fired equipment.
2. **How was the regulation violated?** The regulation was violated by not having a carbon monoxide detector within 15 feet of the 3 gas fired dryers as required by the Care Facilities Carbon Monoxide Standards Act.
3. **What caused the violation?** The cause of the violation was not replacing a carbon monoxide detector when it malfunctioned.
4. **What can be done right away to fix the violation?** Violation was immediately corrected by placing a new carbon monoxide detector within 15 feet from the 3 gas dryers.
5. **What can we do to prevent future violation?** Make sure all carbon monoxide detectors are replaced immediately when they malfunction.
6. **Who will be responsible for preventing future violation?** Robert J. Delbo, Administrator.

Signature of Legal Entity Representative

Robert J. Delbo

Printed Name and Title of Legal Entity Representative

Robert J. Delbo, Administrator

Date 4-4-19

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Staff person A who was hired on 9/10/2018 did not receive training in the topics required by this regulation until 9/13/2018.

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.

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Deluca*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Deluca, Administrator* Date *4-4-19*

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Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

April 3, 2019

Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa.Code – 2600 –65(a)**

1. **Why is the regulation important?** To ensure all direct care staff including ancillary staff persons, substitute personnel and volunteers be oriented in general fire safety and emergency preparedness.
2. **How was the regulation violated?** Regulation was violated by not training the employee the first work day even if they were only doing paper work at home for the position.
3. **What caused the violation?** The cause of the violation was not training the staff person the day they took the paper work home to read and complete.
4. **What can be done right away to fix the violation?** Instead of allowing a new hire take paper work, fire safety policy, and emergency preparedness policy home, a walk through and training will be done that day.
5. **What can we do to prevent future violation?** Future violations can be prevented by not allowing staff to take any paper work home or read any information at home. All forms and paper work will be filled out in the facility the first work day and a walk through on fire safety and emergency preparedness will be done.
6. **Who will be responsible for preventing future violation?** Robert J. Delbo, Administrator.

Signature of Legal Entity Representative

Robert J. Delbo

Printed Name and Title of Legal Entity Representative

Robert J. Delbo Administrator

Date

4-4-19

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600

2600.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- (4) A staff person who has completed the medication administration training as specified in § 2600.190 for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Staff person B's med tech training annual practicum for 2018 is incomplete because it was not dated when the staff person was recertified.

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.

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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Delbo, Administrator* Date *4-4-19*

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Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

April 3, 2019

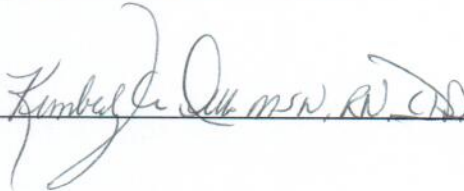
Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa. Code – 2600.182(b)**

1. **Why is the regulation important?** To ensure PCH comply with all applicable state laws and regulations pertaining to safe medication administration, management, and medication training to promote competency. It is in place to promote public safety of residents. This regulation requires that all prescription medications are administered by a staff member who has completed the medication administration training as specified in 2600.190.
2. **How was the regulation violated?** The regulation was violated by failure to date staff person B's med training annual practicum for 2018 rendering it incomplete.
3. **What caused the violation?** The cause of the violation consisted of the approved medication administration trainer not documenting a date on the medication technician's (staff person B's) medication administration annual practicum.
4. **What can be done right away to fix the violation?** Violation was immediately corrected by placing the recertification date on 12/17/2018 on staff member B's annual practicum upon identification of the documentation error during the DHS site visit on 3/13/2019 (see attached).
5. **What can we do to prevent future violation?** Make sure all recertification dates to the medication administration practicum are inserted on the day of recertification and they are checked for completion
6. **Who will be responsible for preventing future violation?** Kimberly A. Delbo, MSN, RN, CSN, CDP, Director of Nursing Services and Innovation

Signature of Legal Entity Representative



Printed Name and Title of Legal Entity Representative: Kimberly A. Delbo, MSN, RN, CDP

Date 4/3/2019

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy

PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600

2600.183(e) - Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION

The Breo inhaler for resident #1 was not dated when the inhaler was opened for use.

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.

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Signature of Legal Entity Representative
(Required on EVERY Page) *Robert J. Delbo*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Robert J. Delbo, Administrator* Date *4-4-19*

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Emmanuel Home
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April 3, 2019

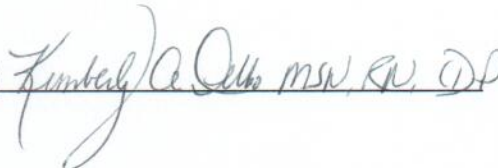
Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa. Code – 2600.183(e)**

1. **Why is the regulation important?** To ensure PCH comply with all applicable state laws and regulations pertaining to safe storage and organized manner of prescription, OTC medications, and CAM. To ensure proper conditions for medication storage under proper sanitation, temperature, moisture and lighting and as in accordance with manufacturer's instructions.
2. **How was the regulation violated?** The regulation was violated by failure to date a Breo inhaler for resident #1 when the inhaler was opened for use.
3. **What caused the violation?** The cause of the violation consisted of the medication technician failing to date an inhaler upon opening or the sticker with the date being removed from the inhaler.
4. **What can be done right away to fix the violation?** Violation was immediately corrected on 3/13/2019 by discarding the Breo inhaler and replacing it with a new one which was labeled with the date of opening. Medication technicians were provided reinforced education regarding the need to label all inhalers, insulins, etc. at the time of opening. They were also instructed by the Director of Nursing Services to check all dates prior to administration of each medication.
5. **What can we do to prevent future violation?** Make sure all inhalers, and medications are properly labeled with the date of opening.
6. **Who will be responsible for preventing future violation?** All medication technicians and Kimberly A. Delbo, MSN, RN, CSN, CDP, Director of Nursing Services and Innovation.

Signature of Legal Entity Representative



Printed Name and Title of Legal Entity Representative: Kimberly A. Delbo, MSN, RN, CDP

Date 4/3/2019

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy

PCH Name: EMMANUEL HOME

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 #2 has an order for blood glucose readings 4 times daily. On 3/11/2019 at 8am the reading in the resident's glucometer was 112; the reading was documented as 113.

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.

See attached

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Robert J. Delbo

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

Robert J. Delbo, Administrator

Date *4-4-19*

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

The above plan of correction is approved as of 4-19-19
(Date)

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

Plan of correction implementation status as of 4-19-19
(Date)

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

Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

April 3, 2019

Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa. Code – 2600.185(a)**

1. **Why is the regulation important?** To ensure PCH develop and implement procedures related to the safe storage, access, security, distribution, and use of medications and medical equipment by trained staff persons.
2. **How was the regulation violated?** This regulation was not directly violated; however occurred as a result of the CNA/med technician incorrectly documenting the Resident #2's blood glucose on his blood sugar log. Upon further investigation, it was noted that another resident had a blood sugar of 113 at 8am on 3/11/2019.
3. **What caused the violation?** The cause of the violation consisted of the medication technician erroneously documenting the blood sugar of another resident on Resident #2's blood sugar log.
4. **What can be done right away to fix the violation?** The violation was immediately corrected on 3/13/2019 by G.B. CAN which resulted in correcting her documentation error by placing a single line through the 113 and her initials, as well as the correct blood sugar reading of 112. (see attached correction)
5. **What can we do to prevent future violation?** Review and make sure all documentation is indeed accurate and reflects any objective or subjective data collected. Kimberly Delbo, MSN, RN, CSN provided reinforcement education with staff while stressing the importance for all staff to accurately document in a timely manner.
6. **Who will be responsible for preventing future violation?** All medication technicians and Kimberly A. Delbo, MSN, RN, CSN, CDP, Director of Nursing Services and Innovation.

Signature of Legal Entity Representative



Printed Name and Title of Legal Entity Representative: Kimberly A. Delbo, MSN, RN, CDP

Date 4/3/2019

4-19-19

MM

Violation Report: 20053 - 03/13/2019 - Deluca, Amy
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600
 2600.252 - Each resident's record must include the following information: (1) through (26)

2a. DESCRIPTION OF VIOLATION
 Resident #4's record did not include the resident's height.

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.

See Attached

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert J. Delby*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Robert J. Delby, Administrator</i>	Date <i>4-4-19</i>
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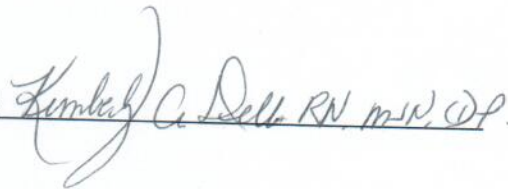
Plan of correction, Pa. Department of Human Services Inspection on March 13, 2019

Violation Report License Number: 200530

Regulation **55 Pa. Code – 2600.252**

1. **Why is the regulation important?** To ensure PCH comply with state regulation's regarding resident records and information.
2. **How was the regulation violated?** This regulation was violated by the PCH staff failing to document a height for Resident #4 in her resident record.
3. **What caused the violation?** Failure of the primary care provider to obtain height and document it on the medical evaluation and failure of the staff to not obtain and document a height upon admission of Resident #4 into the PCH.
4. **What can be done right away to fix the violation?** The violation was immediately corrected on 3/13/2019 at the time of the site visit. A height was obtained for Resident #4 and it was documented in Resident #4's chart. (see attached)
5. **What can we do to prevent future violation?** Review and make sure all documentation returned on the medical evaluation is completed by the residents' provider. Provided reinforcement of education for staff to obtain a height (weight, and vital signs) for each resident upon admission and document it within the resident's record.
6. **Who will be responsible for preventing future violation?** All medication technicians and Kimberly A. Delbo, MSN, RN, CSN, CDP, Director of Nursing Services and Innovation.

Signature of Legal Entity Representative


Kimberly A. Delbo RN MSN CDP

Printed Name and Title of Legal Entity Representative: Kimberly A. Delbo, MSN, RN, CDP

Date 4/3/2019

4-19-19

MM