



June 11, 2019

Ms. Renna Engel
Administrator
Presbyterian Homes Inc.
One Trinity Drive East, Suite 201
Dillsburg, Pennsylvania 17019

RE: Presbyterian Home at Williamsport
810 Louisa Street
Williamsport, Pennsylvania 17701
License #: 200540

Dear Ms. Engel:

As a result of the Department's Bureau of Human Services Licensing annual inspection on March 27, 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 that reads "J. Rowe". The signature is written in a cursive, flowing style.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 20054 - 03/27/2019 - Deluca, Amy
PCH Name: PRESBYTERIAN HOME AT WILLIAMSPORT

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 exit door located directly across from resident room 110 required excessive force to push open during the initial walk through.

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.

Regulation 2600.121(a) stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed:

The Williamsport Bureau of Fire Safety, Fire Inspection completed annual fire safety/ building inspection on 3/4/19. All emergency doors opened immediately during inspection with no corrective action required. During egress checks on inspection the emergency exit door stuck a little when initially opened, no excessive force was used to open the door, a push on the door to open. Administrator immediately call maintenance to check the exit door, Maintenance immediately corrected the areas that stuck. **Root Cause-** snow /weather conditions earlier in the week caused the weather strip to stick. Maintenance immediately corrected and called the inspector to re-check the door which opened immediately.. I would respectfully request re-consideration 2nd to immediate correction and recheck by the inspector.

- Employee education provided by the administrator 3/28/19
- Policy and Procedure was updated and reviewed with Maintenance to ensure compliance with regulation 2600.121 (a) to maintain a safe environment for residents, staff and visitors.
- PHW personnel are responsible for observing the environment for potential safety hazards and initiate corrective action when observing to ensure egress doors open immediately. All emergency stairways, hallways, doorways, passageways and egress routes from rooms and form the building will be unlocked and unobstructed.
- Emergency exit doors for both emergency exits & sun room exit door will be check weekly by maintenance to ensure safety for residents served.
- Maintenance will complete weekly egress exit audit and initial when completed.
- The administration will monitor and audit completion of safety checks for egress doors to ensure they are unlocked and unobstructed.

Repeat Violation: No	Date(s) of Previous Violation(s): <i>N/A</i>	
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Signature of Legal Entity Representative *Renna Engel*
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative <i>Renna Engel</i> (Required on EVERY Page) <i>PCHA</i>	Date <i>5/13/19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5-14-19
 (Date)

Plan of correction implementation status as of 5-14-19
 (Date)

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

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

Violation Report: 20054 - 03/27/2019 - Deluca, Amy
PCH Name: PRESBYTERIAN HOME AT WILLIAMSPORT

1. REGULATION 55 Pa.Code §2600

2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION

The first aid kit in the home's vehicle used to transport residents to appointments did not contain eye coverings.

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.

Regulation 2600.171(b)(5) If a staff person or volunteer of the home provide transportation for a resident, the vehicle must have a first aid kit with the contents in 2600.96 (relating to first aid kit). Listed items to include the following: nonporous disposable gloves, antiseptic, adhesive bandaged, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

The vehicles first aid kit had all contents listed per regulation 2600.96-Non porous disposable gloves, antiseptic, adhesive, bandage, gauze pad, thermometer adhesive tape, scissors, breathing shield. Eye covering/eye pad and tweezers. The inspector related that "goggles" where required with the vehicles first aid kit. The administrator had maintenance immediately put a pair of goggles with the first aid kit supplies. I would like to respectfully ask for reconsideration since the goggles where immediately put with the first aid kit. Root Cause: "Google's" not with first aid kit/ sterile eye covering was in the first aid kit; Regulation listed eye covering- "goggles" are not listed in regulation 2600.96. **Immediate implementation** of "goggles" with the first aid kit supplies.

- Employee education provided by the administrator on 3/28/19
- Policy & Procedure updated to ensure compliance with regulation 2600.171(b) (5)
- Monthly Audit Tool had been implements to ensure first aid kit has all contents as listed in regulation
- Monthly Frist Aid /Audits will be completed to ensure that all contents are in the first aid kit as listed above in regulation 2600.96 - Implemented 3/28/19
- Nurse Manager/ Administrator will complete First Aid Kit Audits monthly implemented 3/28/19
- First Aid Audit Sheet will be initialed on the date when the Frist Aid Kit check to completed to ensure all items are present and up to date. Implemented 3/28/19
- Frist Aid Kit will contain all contents listed in regulation 2600.96 to ensue essential items are available for basic emergency medical care in the event of an emergency, implemented 3/28/19

Repeat Violation: No	Date(s) of Previous Violation(s):	N/A	
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Renna Engel*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Renna Engel PCHM* Date *5/13/19*

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The above plan of correction is approved as of <u>5-14-19</u> (Date)	Plan of correction implementation status as of <u>5-14-19</u> (Date)
The above plan of correction was approved by <u>MM</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