



October 21, 2019

Mr. James Kusko
President
Sacred Heart Assisted Living, LLC
3910 Adler Place, Suite 100
Bethlehem, Pennsylvania 18017

RE: Sacred Heart Senior Living by the Creek
602 East 21st Street
Northampton, Pennsylvania 18067
License #: 201360

Dear Mr. Kusko:

As a result of the Department's Bureau of Human Services Licensing annual inspection on June 26, 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", written over a white background.

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
Violation Report

Violation Report

Facility Information

Name: SACRED HEART SENIOR LIVING BY THE CREEK
Address: 602 EAST 21ST STREET NORTHAMPTON, PA 18067
County: NORTHAMPTON Region: NORTHEAST

License Number: 20136

Administrator

Name: Gayle Yastrop Phone: 6102624300 Email: AWALLIS@SHFAMILY.ORG

Legal Entity

Name: SACRED HEART ASSISTED LIVING LLC
Address: 3910 ADLER PLACE SUITE 100, BETHLEHEM, PA, 18017

Certificate(s) of Occupancy

Type: C-2 LP Date: 09/11/1997 Issued By: PA L&I
Type: C-2 LP Date: 07/12/2000 Issued By: PA L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 103 Waking Staff: 77

Inspection

Type: Full BHA Docket #: Notice: Unannounced
Reason: Renewal

Inspection Dates and Department Representative

06/26/2019 - On-Site: Ann O'Haire, Amy Deluca

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 124 Residents Served: 75

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 12

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 75
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 28 Have Physical Disability: 2

65b - Rights/Abuse 40 Hours

Regulations

2600.

65.b. Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- 3. Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. § 10225.101—10225.5102).

Description of Violation

Staff person "A" DOH 05-17-19 did not have training in resident rights, emergency medical plan and the Older Adults Protective Services Act (OAPSA) within 40 hours of the first work day.

Plan of Correction (POC) Request: VIOLATION 2600.65b IN DISPUTE

(Attach pages as necessary. Remember to prevent a similar violation from occurring.) Reason: Staff person "A's" New Hire employee documentation stated that the training required within 40 Hours was complete on May 17, 2019. This training was signed and verified by the employee's signature on the bottom of New Employee Verification form.

The training subjects in question, Resident Rights, Emergency Medical Plan review, OAPSA are included in the Employee Handbook which was given to employee on 5-17-2019. The initials of employee "A" signify that she acknowledged receipt of and understands policies.

Above training topics were reviewed with staff person "A" prior to hire on April 26, 2019 as well.

The Employee Handbook table of contents is attached to this report to show subjects are included.

See attached documentation copies:

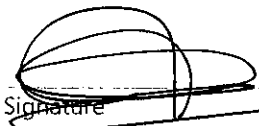
- *Nursing New Employee Checklist / Verification Form
- *Table of Contents Employee Handbook
- *Policies Review

Legal Entity Representative

Human Resources Director will ensure that all training is completed and clearly documented as completed. Redesigned checklist for HR Director has been instituted to assist that all training subjects are completed for every new hire.

Administrator will ensure that HR Director completes all training within Regulation guidelines.

James Kusko, President, Northampton Personal Care Inc.

Signature 

Printed Name General Partner, Northampton Personal Care Associates, LP

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX! Member, Sacred Heart Assisted Living, LLC

The above plan of correction is approved as of 9-17-19 (Date)

Plan of correction implementation status as of 9-17-19 (Date)

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

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

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103e - Left Overs

Regulations

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

A plastic bag of sliced turkey lunch meat and a plastic bag of cooked hamburger patties were found in the home's walk-in cooler unlabeled and not marked with the date the items were stored in the cooler.

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.)

Violation 2600.103e

Food was removed from the freezer on the morning of inspection. Food label and date was not placed on package due to thawing process.

In future, all food removed from freezer will have immediate label placed on food denoting type of food and date. Weekly checks of all refrigerator /freezer foods and all fry goods will be inspected for labels and dates. An assigned Dietary Aide will be given the task of label check. Dining Services Director will ensure that labels are placed on all foods.

Pull/Thaw/Use by labels were purchased for freezer foods.

Legal Entity Representative

Handwritten signature over a dotted line labeled "Signature".

James Kusko, President, Northampton Personal Care Inc.
General Partner, Northampton Personal Care Associates, LP
Member, Sacred Heart Assisted Living, LLC

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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:

Description of Violation

Resident # 1 has an order for Amoxicillin 500mg capsule to be administered at 6am, 2pm, and 10pm for 7 days starting on 6/27/19. On 6/28/19 the 10pm dose was not initialed as administered by the staff person who administered the medication.

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.)

Violation 2600.187a

Although the Amoxicillin bubble pack was not initialed by Med Tech, medication ordered for Resident #1 was administered.

The inspector at time of inspection confirmed that medication was administered, not initialed.

Med Tech was informed of error. Director of Nursing will offer instruction to ensure that initialing medication card is completed for all med passes.

Legal Entity Representative

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