



July 26, 2019

Mr. Brian Rendos
COO
Guardian Elder Care at Tyrone I, LLC
P.O. Box 240
8796 Route 219
Brockway, Pennsylvania 15824

RE: Epworth Manor Senior Living
925 South Lincoln Avenue
Tyrone, Pennsylvania 16686
Certificate # 328420

Dear Mr. Rendos:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on July 9, 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 "Carolyn K. Ellison".

Carolyn K. Ellison
Deputy Secretary, Office of Administration
Shared Services for Health and Human Services

Enclosure
Violation Report

Violation Report

Facility Information

Name: *EPWORTH MANOR SENIOR LIVING*

License Number: 32842

Address: *925 SOUTH LINCOLN AVENUE, TYRONE, PA 16686*

County: *BLAIR*

Region: *CENTRAL*

Administrator

Name: *Patti Stockley*

Phone: *8146862656*

Email:

Legal Entity

Name: *GUARDIAN ELDER CARE AT TYRONE I LLC*

Address: *8796 ROUTE 219 PO BOX 240, PA, 15824*

Certificate(s) of Occupancy

Type: *C-2 LP*

Date: *08/06/2002*

Issued By: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *56*

Waking Staff: *42*

Inspection

Type: *Full*

BHA Docket #:

Notice: *Unannounced*

Reason: *Renewal*

Inspection Dates and Department Representative

07/09/2019 - On-Site: Jason McCloskey, Hope O'Pake

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *54*

Residents Served: *42*

Secured Dementia Care Unit

In Home: *Yes*

Area:

Capacity: *12*

Residents Served: *12*

*Memory Support
Neighborhood*

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *42*

Diagnosed with Mental Illness: *0*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *14*

Have Physical Disability: *0*

89b - Hot Water Temperature

Regulations

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

At approximately 3:30pm, the hot water temperature at the bathroom sink in room 102 measured 127 degrees Fahrenheit, the hot water at the bathroom sink in room 112 measured 130 degrees Fahrenheit, and the hot water at the activity room sink measured 131 degrees Fahrenheit.

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.)

1. This regulation is important because it protects the residents from accidental scalding.
2. The regulation was violated because the inspector found the hot water temperature at the bathroom sink in room 102 measured 127 degrees fahrenheit, the hot water at the bathroom sink in room 112 measured 130 degrees fahrenheit, and the hot water in the activity room sink measured 131 degrees fahrenheit.
3. This violation was corrected. Schultz Heating and Plumbing Co. made a service call on 7/10/19. The technician found the mixing valve to the hot water heater not functioning properly. Replaced mixing valve.
4. The administrator will monitor the water temperatures to these specific rooms daily for two weeks. And then Maintenance director will continue to monitor water temperatures daily to areas accessible to residents in the building farthest south, middle and north.
5. The administrator will collect all audit logs to ensure water temperatures are within safe and compliant temperatures not to exceed 120 degrees Fahrenheit.

Legal Entity Representative

Patti Stockley

Signature

Patti Stockley - Administrator 7/22/19

Printed Name and Title

Date

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The above plan of correction is approved as of 7/26/19
(Date)

Plan of correction implementation status as of 7/26/19
(Date)

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

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

132b - Safety Inspection/Fire Drill

Regulations

2600.

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The most recent fire safety inspection and fire drill conducted by a fire safety expert occurred on 6/22/18.

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.)

1. This regulation is important because it identifies and corrects unsafe conditions and helps prevent fires from occurring.
2. The regulation was violated because the inspector found that the most recent fire safety inspection and fire drill conducted by a fire safety expert occurred on 6/22/18.
3. Administrator attempted to contact the Fire Marshall several times to schedule the fire safety inspection and drill prior to the annual renewal date. On 7/10/19, administrator contacted the Assistant Fire Chief, Bill McElwine at Blazing Hook and Arrow Fire Company. He assured me that he would call me back with times to schedule our fire safety inspection and supervised drill.
4. The Administrator will maintain the dates of the annual fire safety inspection and drill via the facility fire safety log to be compliant with the annual documnetation.

*The supervised fire drill and fire safety inspection was completed on 7/25/19.
BAS 7/26/19

Legal Entity Representative

Patti Stockley

Signature

Patti Stockley - Administrator

Printed Name and Title

7/22/19

Date

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182c - Medication Administration

Regulations

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

- 6. Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in subsection (b)(4).

Description of Violation

The licensing representative observed Staff Person A give medications to Residents 1, 2, 3, and 4. Staff Person A initialed the medication administration record to document the administration of the medications, then provided the medications to Resident 1, but did not observe the resident ingest the medications. This same administration process was followed for Residents 2, 3, and 4.

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.)

1. This regulation is important because it ensures that the medication is administered correctly and safely.
2. This regulation was violated when the licensing representative observed Staff Person A giving medications to Residents 1,2,3 and 4. Staff Person A initialed the medication administration record to document the administration of the medications, then provided the medications to Resident 1, but did not observe the resident ingest the medications. This same administration process was followed for Resident 2,3, and 4.
3. This violation was corrected immediately. Shawnee Miller, Medication Train the Trainer, provided re-education to Staff Person A. In addition, Mrs. Miller will observe Staff Person A, during the noon medication pass, daily for 2 weeks, weekly for 2 weeks and monthly for 2 months, using an audit tool that is attached.
4. The Administrator will review audit logs to ensure that the medication is being administered correctly and safely.
5. Administrator and Medication Train the Trainer has scheduled a meeting on 7/25 with all medication technicians to re-educate on the importance of administrating medications safely and correctly.

Legal Entity Representative

Patti Stockley

Signature

Patti Stockley - Administrator

Printed Name and Title

7/22/19

Date

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