



MAILING DATE: October 4, 2019

Mr. Len Capuzzi
Vice President/Administrator
East Deer Personal Care Home, Inc.
967 Freeport Road
Creighton, Pennsylvania 15030

RE: East Deer Personal Care Home
License #: 430780

Dear Mr. Capuzzi:

As a result of the Department's Bureau of Human Services Licensing inspection on July 11, 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, appearing to read "L. Mazza".

Larry Mazza
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

RECEIVED

SEP 24 2019

License Number: 43078

Western Region

Facility Information

Name: *EAST DEER PERSONAL CARE HOME*
Address: *967 FREEPORT ROAD,, CREIGHTON, PA 15030*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: *Len Capuzzi* Phone: *7242249997* Email: *CAPUZZI227@AOL.COM*

Legal Entity

Name: *EAST DEER PERSONAL CARE HOME INC*
Address: *967 FREEPORT ROAD, CREIGHTON, PA, 15030*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *04/07/2008* Issued By: *Labor and Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *40* Waking Staff: *30*

Inspection

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

Inspection Dates and Department Representative

07/11/2019 - On-Site: Ashley Roser

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* Residents Served: *38*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *7* Are 60 Years of Age or Older: *35*
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *2* Have Physical Disability: *0*

17 - Record Confidentiality

Regulations

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.

Description of Violation

At 9:31 a.m., the 2nd floor medication administration record (MAR) book was unlocked, unattended and accessible on top of the medication cart, which contained numerous resident's July 2019 MAR's, including the MAR's for residents #1, #2, #3, #4, #5 and #6.

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.)

RN said that she left the MAR book unattended on top of the med cart. She did not lock it back up when she became distracted. All RNs and med techs will be reeducated on properly locking MAR book back up when not in use.

Staff training began on 9/25/19 and will conclude by 10/2/19. Documentation of staff education shall be kept.

AM 9/25/19

Immediately: A designated staff person shall inspect the home daily to ensure all resident information, including all resident MAR's, are kept in an area that is locked.

AM 9/25/19

Legal Entity Representative

Signature [Handwritten Signature]

Len Capuzzi
Printed Name and Title

9-19-19
Date

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

The above plan of correction is approved as of 9/25/19 (Date)

Plan of correction implementation status as of 9/25/19 (Date)

The above plan of correction was approved by [Handwritten Initials] (Initials)

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

183b - Meds and Syringes Locked

Regulations

2600.
183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

At 9:31 a.m. the following medications were unlocked, unattended and accessible on top of the 2nd floor medication cart:

*Resident #1's-Hydrophor Ointment

*Resident #2's-Budesonide80/4.5 inhaler

*Resident #3's-Fluticason nasal spray

Olodpatadine .01% eye drops

*Resident #4's-Ketoconazole 2% cream

Zeasorb 2% powder

*Resident #5's-Triamcinolone 1% cream

*Resident #6's-Breo Ellipta inhaler

Spiriva Respimat 2.5 mcg inhaler

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.)

RN indicated that she had these treatments out but she did not put away. She, as well as other RNs and all med techs, will be reeducated on proper storage.

Staff training began on 9/25/19 and will conclude by 10/2/19. Documentation of staff education shall be kept. 9/25/19

AM

Immediately: A designated staff person shall inspect the home daily to ensure all prescription medications, OTC medications, CAM and syringes are kept in an area or container that is locked. 9/25/19

AM

183b - Meds and Syringes Locked (continued)

Legal Entity Representative


Signature


Len Capuzzi
Printed Name and Title

9-19-19
Date

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(Date)

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183e - Storing Medications

Regulations

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.

Description of Violation

Resident #7 is prescribed Aripiprazole 2 mg-Take 1/2 tablet by mouth once a day; however a 1/2 tablet of the resident's medication was loose and out of the packaging in the 1st floor medication cart.

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.)

RNs and med techs will be reeducated to make sure that all contents in med packages are accounted for. They will check the number of pills in the packs to the MAR and make sure that each one is accounted for. They will recheck the medication prior to administration. RNs and med techs will inspect med packages to make sure that it is not torn or open when separated from the roll.

Staff training began on 9/25/19 and will conclude by 10/2/19. Documentation of staff education shall be kept.

AM

Legal Entity Representative

[Signature]
Signature

Len Capora
Printed Name and Title

9-19-19
Date

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(Date)

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(Initials)

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187b - Date/Time of Medication Admin.

Regulations

2600.

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

Description of Violation

On the morning of 7/11/19, staff persons A and B administered numerous medications to numerous residents, including residents #1, #2, #3, #4, #5, #6, #7 and #8; however, did not initial the residents' July 2019 MAR's as administering the medications.

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.)

All RNs and med techs will be reeducated on initialing the MAR after each medication is administered.

Staff training began on 9/25/19 and will conclude by 10/2/19. Documentation of staff education shall be kept. *AM* 9/25/19

Immediately, then monthly thereafter: A designated staff person shall inspect all resident MAR's to ensure all medications are initialed as administered at the time of medication administration, by the staff person who administered them. *AM* 9/25/19

Legal Entity Representative

[Signature]
Signature

Len Capora
Printed Name and Title

9-19-19
Date

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