



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: rstuckich@lynnhaven.comcastbiz.net

MAILING DATE: May 4, 2020

Ms. Renee Stuckich
Owner / Administrator
Renee Stuckich
119 Walnut Street
PO Box 484
Black Lick, Pennsylvania 15716

RE: Lynn Haven Personal Care Home
Certificate #: 445160

Dear Ms. Stuckich:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 7, 2020, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely

A handwritten signature in black ink, appearing to read "Jason Williams".

Jason Williams
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: LYNN HAVEN PERSONAL CARE HOME

License Number: 44516

Address: 119 WALNUT STREET, PO BOX 484, BLACK LICK, PA 15716

County: INDIANA

Region: WESTERN

Administrator

Name: Renee Stuckich

Phone: 7244227412

Email: RSTUCKICH@LYNNHAVEN.COMCASTBIZ.NET

Legal Entity

Name: RENEE STUCKICH

Address: PO BOX 484, BLACK LICK, PA, 15716

Certificate(s) of Occupancy

Type: I-1

Date: 07/26/2006

Issued By: Indiana Co Office of
Planning and Development

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 32

Waking Staff: 24

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal, Complaint

Inspection Dates and Department Representative

01/07/2020 - On-Site: Belinda Graziano, Desmond Grace

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 36

Residents Served: 31

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 20

Are 60 Years of Age or Older: 20

Diagnosed with Mental Illness: 15

Diagnosed with Intellectual Disability: 6

Have Mobility Need: 1

Have Physical Disability: 0

82a - Poisonous Materials

Regulations

2600.

82.a. Poisonous materials shall be stored in their original, labeled containers.

Description of Violation

In the laundry room was a clear 1-liter bottle half full of a clear liquid with the word "alcohol" written in the bottle in black permanent marker. However, the original Great Value Isopropyl Alcohol label indicated contact poison control if ingested.

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.)

I immediately removed the bottle. I have re-educated the staff of the regulation and checked the facility for any other chemicals not in compliance.

The administrator will check weekly to ensure all poisonous materials will remain in the original labeled containers. If any are found they will be disposed of and staff will be educated and reprimanded as per our policies and procedures.

Legal Entity Representative



Renee Stuckich

Signature

Renee Stuckich, Administrator

Printed Name and Title

04/12/2020

Date

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The above plan of correction is approved as of

4/28/20

(Date)

Plan of correction implementation status as of

4/28/20

(Date)

The above plan of correction was approved by

JW
(Initials)

 Implemented

 Not Implemented

82c - Locking Poisonous Materials

Regulations

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

At 1:45 p.m., a 19 ounce Lysol aerosol spray can, with a manufacture's label indicating, "Call a Poison Control Center (1-866-366-5048) or doctor for treatment advice," was unlocked, unattended and accessible on a wheel cart at the top of the stairs. Not all the residents of the home, including resident #1, have been assessed capable of recognizing and using poisons safely.

Plan of Correction (POC)

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The can was removed immediately, The facility was checked for any other poisonous materials left unlocked, none were found. I reminded cleaning staff of the regulation and that no chemicals can be left on her cart and must be locked at all times. I checked the cart daily for 2 weeks and found no chemicals left there. I will check the cart weekly to ensure compliance

Legal Entity Representative

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Signature

Renee Stuckich, Administrator

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85d - Trash Receptacles

Regulations

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

The lid for the kitchen trash, which was full of food and trash, has a 12-inch by 8-inch hole in the lid.

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.)

The trash can was removed and replaced with another can that has a full covered lid. I will check weekly to ensure compliance.

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Signature

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92 - Windows

Regulations

2600.

92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

There is no screen in the outside window that opens to the exterior of the home in bedroom 8.

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.)

After inspection maintenance found the screen laying below the window. he placed silicone around the screen frame and replaced it in the window to keep it from falling out. Maintenance will walk around the building weekly checking all windows for screens and will replace or fix any missing or broken screens

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93a - Handrails

Regulations

2600.

93.a. Each ramp, interior stairway and outside steps must have a well-secured handrail.

Description of Violation

At 10:25 a.m., the handrails on the exterior ramp of the home by the main floor small hall was not secured in multiple places to include the far-right side at the end by the parking lot and far-right side off of the porch. Both areas moved approximately 1/2 inch to 1 inch from the post.

Plan of Correction (POC)

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Both rails were re-attached to the posts using longer screws and do not move at all now. Maintenance will check the railings monthly to ensure they are properly secured. If found to be loose, maintenance will immediately fix the railings to ensure they are safe and in working order. The administrator will also check them monthly for compliance

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101j7 - Lighting/Operable Lamp

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #2 did not have access to a source of light that can be turned on/off at bedside. The bedside lamp was unplugged and the only reachable electrical outlet had no available plugs.

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.)

The lamp was plugged in to an outlet on the other side of the table. All bedside lamps were checked and are plugged in and operable. I educated the staff to check the lamps during routine weekly cleaning of each room. I also asked the cleaning staff to check that all bedside lamps are plugged in and operable when she sweeps and cleans bedrooms i will do random checks of alternating bedrooms to ensure compliance weekly

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103f - Refrigerator/Freezer Temps

Regulations

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

At 11:00 a.m., the temperature in the lower level freezer measured 10 degrees Fahrenheit and at 11:30 a.m. measured 15 degrees Fahrenheit.

The thermometer in the lower level refrigerator was broken.

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.)

On day of inspection food in the freezer was disposed of and a new thermometer was placed in the refrigerator. The temperature control was turned down to adjust the temperature to be in safe ranges I marked the setting control so staff will know where it needs to be set at. I educated staff of the acceptable temperatures and i checked the temps daily for 1 week and they were within normal safe ranges. I will continue to check them all at least weekly for compliance

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184a - Labeling OTC/CAM

Regulations

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

Resident #3 is prescribed Atropine Sulfate Solution 1% Ophthalmic drops, place 2 drops sublingually every 2 hours as needed for excessive secretions; however, the label indicated place 2 drops sublingually every hour as needed.

Plan of Correction (POC)

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Our nurse verified the order with the doctor and corrected the lable by adding a direction change sticker to the medication lable. She then contacted the pharmacy to clarify the order with them. The Nurse or myself will check all medications delivered to ensure the medication lable is correct and matches the MAR. If an error is found, the medication will be returned to the pharmacy to be corrected. We have checked all current medications and all hav correct labels

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