



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: nwaugaman@srcare.org
ifocareta@srcare.org

Mailing Date: May 4, 2020

Ms. Nicole Waugaman
Director
Longwood at Oakmont, Inc.
500 Route 909
Verona, Pennsylvania 15147

RE: Longwood at Oakmont
Personal Care Center
Certificate #: 429900

Dear Ms. Waugaman:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 13, 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 that reads "Jody Garvey".

Jody Garvey
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: LONGWOOD AT OAKMONT PERSONAL CARE CENTER
Address: 500 ROUTE 909, VERONA, PA 15147
County: ALLEGHENY Region: WESTERN

License Number: 42990

Administrator

Name: Nicole Waugaman Phone: 4128264800 Email: PPETERSON@SRCARE.ORG

Legal Entity

Name: LONGWOOD AT OAKMONT INC
Address: 500 ROUTE 909, VERONA, PA, 15147

Certificate(s) of Occupancy

Type: C-2 LP Date: 12/02/1998 Issued By: Labor and Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 19 Waking Staff: 14

Inspection

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

Inspection Dates and Department Representative

01/13/2020 - On-Site: Laurie Garrigan, Michael Marini

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 49 Residents Served: 18

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 18
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 1 Have Physical Disability: 0

Nicole Waugaman BSN, PCHA, COP-
01/13/2020
Director of Personal Care

03/28/2020
1 of 4

42c - Treatment of Residents

Regulations

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On 12/28/19 at approximately 9:45 a.m., resident #1 was in the dining room eating breakfast. Dietary staff person A approached resident #1, grabbed the resident's right hand that he was holding a fork full of blueberry pancakes with and pushed it down on the table preventing the resident from eating. The staff person then stated I told you before that I need to clean up the dining room after breakfast. Resident #1 indicated the event was awfully upsetting, he was insulted and he thought about it all day.

Plan of Correction (POC)

Added 4-24-20

Page 2 of 4 (2600.42.c)

Staff member A was subjected to a suspension effective 12-28-2020, and was terminated concluding the investigation. Proof submitted via HR statement.

All team members working in personal care will be required to complete **Resident Right, & Abuse, and Neglect Training.** Please see attached power point. We anticipate the completion of this training by April 20, 2020 for routine full time and part time employees. If casual employees are not scheduled prior to April 10, 2020, they will be required to complete the training on the first day scheduled back to work in the community thereafter. All employees will be required to successfully pass the attached quiz at 90% or higher to continue working in personal care. The department directors or designees, from Personal Care, Dietary, Building Services, and Lifestyle Engagement, will conduct training for personal care assigned employees no later than April 10, 2020. In-service sign in sheets will be submitted to the department the week of April 13, 2020 as proof of completion of such training. Please see attachments:

- Attachment A - Power Point Education
- Attachment B- Resident Rights and Abuse Prevention Remediation Quiz
- Attachment C- Resident Rights and Abuse Prevention Remediation Quiz Answer Key
- Attachment D- will follow once completed - Sign in sheets

Legal Entity Representative

Nicole Waugaman BSN, PCHA, CDP
Signature *Director of Personal Care*

Nicole Waugaman BSN, PCHA, CDP
Printed Name and Title *03/28/2020*
Date

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

The above plan of correction is approved as of 4/27/20
(Date)

Plan of correction implementation status as of 4/27/20
(Date)

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

- Implemented
- Not Implemented

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:
 - 4. The prescribed dosage and instructions for administration.

Description of Violation

Resident #2 was prescribed Restasis Multi Dose 0.05% eye drops (Cyclosporine)-give 1 drop in each eye as needed for dry eyes; however the instructions for administration on the pharmacy label indicated give 1 drop in both eyes twice daily.

Plan of Correction (POC)

updated 4-24-20

Page 3 of 4 (2600.184.a.)

Cart was audited on 1-14-2020 and then re-audited formally on 1-30-20. A new system was put in place to verify all orders that are filled to ensure orders match orders on file, please see order book addendum for greater detail

Effective immediately – medication and MAR audits have been started and completed on a monthly basis by our 11-7 nurse. Please see attached audit forms. These audits have demonstrated that the PRN Restasis had no usage, and we received orders to discontinue the PRN Restasis order. Please see attached label and order for verification. All team members who have the capacity to pass medications, including licensed team members will undergo remediation regarding medication labeling and documentation based off Module 8 of Training How to Administer Medications the Right Way. We would expect this training completion by April 20, 2020

- Attachment E- MAR / med cart audits for January 2020
- Attachment F MAR/ Med cart audits for Feb. 2020
- Attachment G- MAR / Med cart audits for April 2020
- Attachment H- Photo of Restasis label
- Attachment I – verbal order for d/c prn Restasis.
- Attachment J- will follow once training completed – sign in sheets

Legal Entity Representative

03-28-2020

Nicole Waugaman BSN, PCHA, CDP
Signature
Director of Personal Care

Nicole Waugaman BSN, PCHA, CDP
Printed Name and Title
Date

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