



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: admin@kbvilla.com
rsallurday@verizon.net
aspeece@aspirefinancial.services

MAILING DATE: April 20, 2020

Ms. Amy Speece
Partner
Knickerbocker Acquisition, LLC
P.O. Box 761
Hummelstown, Pennsylvania 17036

RE: Knickerbocker Villa
304 South Second Street
Clearfield, Pennsylvania 16830
Certificate #: 448700

Dear Ms. Speece:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 16, 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

RECEIVED

4/2/20

Western Region Field Office
Bureau of Human Services Licensing

Violation Report

Facility Information

Name: *KNICKERBOCKER VILLA*
Address: *304 SOUTH SECOND STREET, CLEARFIELD, PA 16830*
County: *CLEARFIELD* Region: *WESTERN*

License Number: *44870*

Administrator

Name: *Roxanne Sallurday* Phone: *8147651933* Email: *ASPEECE@ASPIREFINANCIAL.SERVICES*

Legal Entity

Name: *KNICKERBOCKER ACQUISITION, LLC*
Address: *PO BOX 761, HUMMELSTOWN, PA, 17036*

Certificate(s) of Occupancy

Type: *I-1* Date: *07/10/2005* Issued By: *CLEARFIELD BORO*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *52* Waking Staff: *39*

Inspection

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

Inspection Dates and Department Representative

01/16/2020 - On-Site: Desmond Grace, Joseph Eveges, Lauren Spagna

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *70* Residents Served: *39*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Care* Capacity: *17* Residents Served: *11*

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *38*
Diagnosed with Mental Illness: *4* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *13* Have Physical Disability: *0*

Roxanne Sallurday
01/16/2020
4/2/20

20b8 - Quarterly Account

Regulations

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

8. The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.

Description of Violation

The home provides assistance with financial management to resident #1; however, between 1/1/19 and 12/31/19, the home did not provide the resident or the resident's designated person with a quarterly itemized account of financial transactions made on the resident's behalf.

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.)

See Attached.

See page 2a of 6 *[Signature]* 4/15/20

Legal Entity Representative

Roxanne Sallurday
Signature

Roxanne Sallurday, Administrator
Printed Name and Title
4/12/20 Date

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

The above plan of correction is approved as of 4/15/20
(Date)

Plan of correction implementation status as of 4/15/20
(Date)

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

Implemented
 Not Implemented

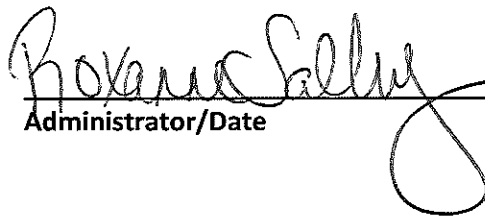
Knickerbocker Villa
License# 44870

Regulation Cited: 2600.20(b) – If the home provides assistance with financial management or holds resident fund, the following requirements apply:

8. The home shall give the resident and the resident’s designated person, an itemized account of financial transactions made on the resident’s behalf on a quarterly basis.

Plan of Correction: On 1/16/20, the Business Office Manager gave resident #1 an itemized account of financial transactions made on the resident’s behalf. By 4/1/20 the Business Office Manager shall develop and implement a tracking system to ensure the financial transactions are completed quarterly. Documentation of the audits shall be kept. See attached.

Person responsible for preventing future violations: On 1/16/20, the Administrator reviewed the completed itemized account for resident #1. Beginning 4/1/20 and ongoing, the Administrator will review the quarterly itemized accounts of financial transactions made on the resident’s behalf.

 4/2/20

Administrator/Date

91 - Telephone Numbers

Regulations

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.


Description of Violation

At 11:00 a.m., there were no emergency numbers posted on or near the phone with an outside line in bedroom #21.

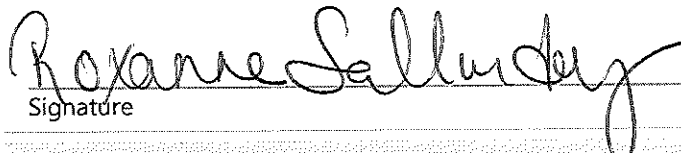
Plan of Correction (POC)

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See Attached

See page 3a of 6  4/15/20

Legal Entity Representative



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Printed Name and Title
4/2/20
Date

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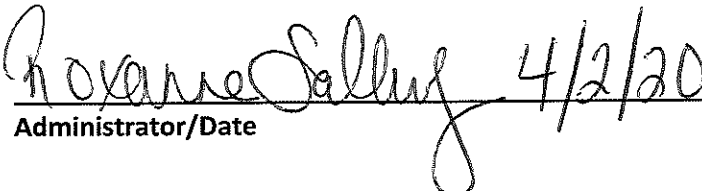
01/16/2020

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License# 44870

Regulation Cited: 2600.91 – Emergency telephone numbers- Telephone numbers for the nearest hospital, police, fire department, ambulance, poison control; local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Plan of Correction: On 1/16/20 the Emergency service telephone numbers were placed by the telephone in room #21. On 1/17/20 the Maintenance Director developed and implemented a tracking system to monitor daily to ensure all rooms with a telephone have Emergency telephone numbers posted on or by each telephone. Documentation of the audits shall be kept. See Attached.

Person responsible for preventing future violations: On 1/20/20, and ongoing the Administrator shall review the audits weekly to ensure the completion of the audit.


Roxanne Salling 4/2/20
Administrator/Date

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

At 11:15 a.m., resident #2 did not have an operable lamp or source of lighting that could be turned on/off from bedside. The lamp was on the bedside table approximately 2 1/2-3 feet away from the resident's bed and could not be reached from bedside.

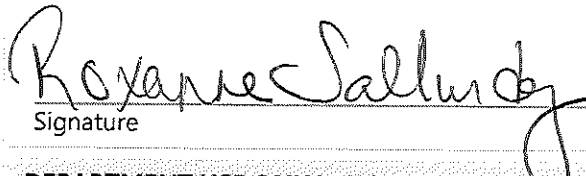
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See Attached

See page 4a of 6  4/15/20

Legal Entity Representative



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Printed Name and Title
4/12/20 Date

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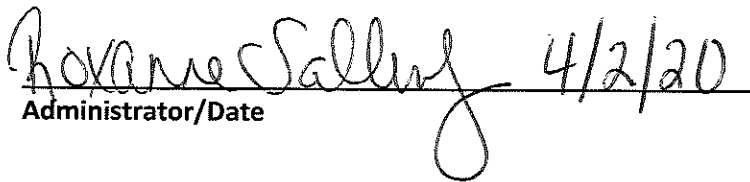
Implemented
 Not Implemented

Knickerbocker Villa
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Regulation Cited: 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.

Plan of Correction: On 1/16/20 the bedside table with the lamp was moved closer to the bed of resident #2, to ensure the lamp is reachable at all times. On 1/17/20 the Maintenance Director developed and implemented a tracking system to monitor daily, to ensure all lamps or other source of lighting can be turned on at bedside. Documentation of the audits shall be kept. See attached.

Person responsible for preventing future violations: On 1/20/20 and ongoing the Administrator shall review the audits weekly to ensure the completion of the audit.

 4/2/20

Administrator/Date

121a - Unobstructed Egress

Regulations

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The home's emergency exit door #4, located in the secured dementia care unit (SDCU), required considerable force to open once the magnetic locking system was disengaged.

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.)

See Attached.

See page 5a of 6 *[Signature]* 4/15/20

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Signature

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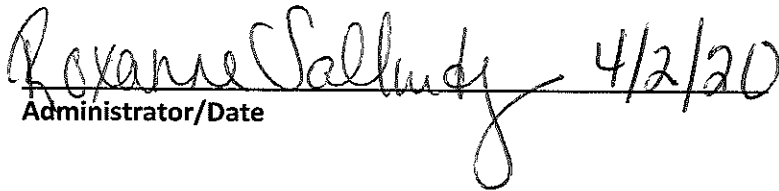
01/16/2020

Knickerbocker Villa
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Regulation Cited: 2600.121(a) – Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Plan of Correction: On 1/16/20 the Maintenance Director removed obstruction from the outside of exit #4. On 1/17/20 the Maintenance Director developed and implemented a tracking system to monitor daily, to ensure all exit doors are easily operable. Documentation of the audits shall be kept. See attached.

Person responsible for preventing future violations: On 1/20/20 and ongoing the Administrator shall review the audits weekly to ensure the completion of the audit.

 4/2/20
Administrator/Date

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:

6. Dose.

Description of Violation

Resident #1 was prescribed Novolog 100 units/ml injected per sliding scale at 8 a.m., 12 p.m. and 5 p.m. per the following sliding scale:

<200 mg/dl = no insulin, 201-250 mg/dl =6U, 251-300 mg/dl =8U, 301-350 mg/dl =10U, 351-400 mg/dl =12U, 401-450 mg/dl =14U, call if glucose less than 70 mg/dl or greater than 400 mg/dl call the physician.


On 1/11/20 at 8:00 a.m., the resident's blood sugar reading was 141mg. The resident was administered 0 Units of insulin; however, the resident's January 2020 medication administration record (MAR) indicated that 8 units of the insulin were administered.

Repeat Violation: 1/23/19

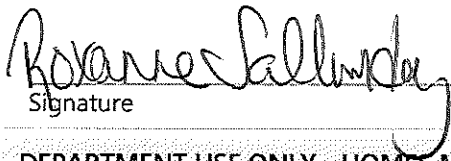
Plan of Correction (POC)

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See Attached.

See page 6a of 6  4/15/20

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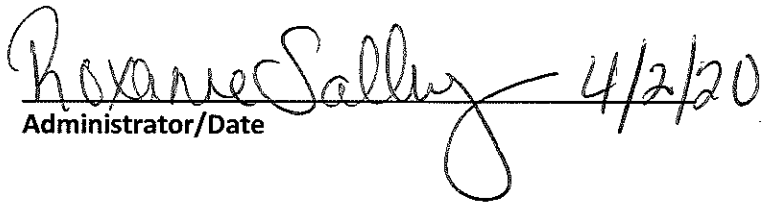
Knickerbocker Villa
License#44870

Regulation Cited: 2600.187(a) – A medication record shall be kept to include the following for each resident for whom medications are administered:

6. Dose

Plan of Correction: On 1/20/20 the Care Coordinator educated all Med-Techs the feature on the QuickMAR system. See attached. When the confirmation page of documentation is displayed, there is a down arrow next to the listed medication, in this case Novolog. When the down arrow is clicked, it will display the instructions for the medication, in this case, it shows the sliding scale instructions under one Novolog, and the routine ordered instructions under the other Novolog. The Care Coordinator instructed Med-Techs to use this feature to ensure accuracy of the documentation of unit amounts entered (Sliding Scale dose vs. routine dose) to eliminate documentation errors. See Attached. On 1/20/20 The Care Coordinator developed and implemented a tracking system to monitor daily to ensure proper documentation of the administered insulin. Documentation of the audits shall be kept. See attached.

Person responsible for preventing future violations: On 1/20/20, and ongoing the Administrator shall review the audits weekly to ensure the completion of proper documentation.



Administrator/Date