

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC**

Facility Information

Name: *ADVANCED PERSONAL CARE HOME* License #: *44048* License Expiration Date: *05/20/2021*
Address: *245 CENTER STREET, PO BOX 5, CLARKSVILLE, PA 15322*
County: *GREENE* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *07/01/1992* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *34* Waking Staff: *26*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *04/14/2021*

Inspection Dates and Department Representative

04/13/2021 - On-Site: [REDACTED]
04/14/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *39* Residents Served: *32*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *31* Are 60 Years of Age or Older: *23*
Diagnosed with Mental Illness: *31* Diagnosed with Intellectual Disability: *3*
Have Mobility Need: *2* Have Physical Disability: *0*

Inspections / Reviews

04/13/2021 - Full

Lead Inspector: [REDACTED] iano

Follow-Up Type: *POC Submission*Follow-Up Date: *05/23/2021*

6/3/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *06/07/2021*

6/11/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *06/21/2021*

9/20/2021 - Document Submission

Lead Reviewer: [REDACTED] ms

Follow-Up Type: *Not Required*

51 - Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Direct care staff person A, started working in the home on [REDACTED]. However, the home did not complete a criminal history background check for this staff person.

Plan of Correction

Accept

A criminal background check was done on staff person A. Now and in the future, criminal history checks will be done within regulation time frame.

An employee file check list has been put in place to assure all employees have all required documentation.

Completion Date: 04/29/2021

Document Submission

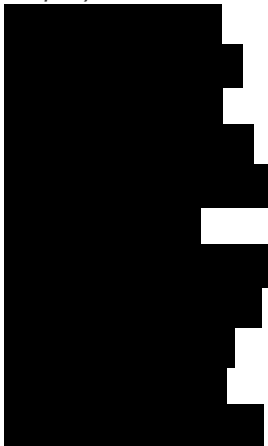
Implemented

All employee files have been checked. I have pasted below a checklist that was created while doing so.

Advanced Personal Care Home, Inc.

Employee File Check

Employee Name Checked



88a - Surfaces

1. Requirements

2600.

- 88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

A 12 inch long section of the wallboard between the kitchen and resident room #4 was cracked and pushed in approximately 1/4 inch posing a possible skin tear hazard.

Plan of Correction

Accept

Duct tape was temporarily placed over the crack in wall board to prevent injury to anyone. A new wall board will be purchased to replace damaged board.

Completion Date: 06/15/2021

88a - Surfaces (continued)

Document Submission**Implemented**

This correction has already been completed. If you would like images sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

96a - First Aid Kit

1. Requirements

2600.

96.a. The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

Description of Violation

The first aid kit in the medication room does not include a thermometer.

Plan of Correction**Accept**

A thermometer was placed in the first aid kit immediately while the inspection was still taking place. Staff will check first aid kits weekly to assure all required items are included in the first aid kit.

Completion Date: 04/13/2021

Document Submission**Implemented**

This correction has already been completed. If you would like images sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

100a - Exterior - Free of Hazards

1. Requirements

2600.

100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

Approximately 20 feet from the dumpster, in the yard, was a large pile of debris consisting of an old loveseat, chairs, approximately eight cardboard boxes and a wooden nightstand.

In addition, on the porch was a pile of debris under a ripped tarp consisting of a television, an umbrella, old tires and a wheelbarrow.

Plan of Correction**Accept**

All debris was removed. The temporary burn pile was eliminated. A resident garden will be planted where the burn pile was.

Burning will no longer be done on property. Anything to be burnt will be kept in a secure location. Staff education will be completed.

Completion Date: 06/20/2021

Document Submission**Implemented**

This correction has already been completed. If you would like documents sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

103d - Storing Food Off Floor

1. Requirements

2600.

103.d. Food shall be stored off the floor.

Description of Violation

On 4/13/2021 at 11:00 a.m., a box of diet Pepsi, with approximately 12 cans, was stored on the floor in the basement.

Plan of Correction

Accept

The case of Diet Pepsi was immediately picked up off of the floor and placed on shelving.

Staff will check daily to assure all food items are stored properly. Staff will be trained in proper food storage.

Completion Date: 06/15/2021

Document Submission

Implemented

This correction has already been completed. If you would like documents sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

103f - Refrigerator/Freezer Temps

1. Requirements

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

On 4/13/2021, the digital thermometer in the refrigerator in the kitchen was not functional.

Also, there was no thermometer in the white Kenmore chest freezer in the basement.

Plan of Correction

Accept

A thermometer was immediately placed in the refrigerator and in the chest freezer. Staff will check weekly to assure thermometers are in place. Additional thermometers were purchased in case one is misplaced or non-functioning.

Completion Date: 04/13/2021

Document Submission

Implemented

This correction has already been completed. If you would like images sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

103g - Storing Food

1. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On 4/13/2021 at 11:06 a.m., the following items were opened and unsealed on the metal shelves in the kitchen:

Bag of hot dog buns, 4 buns in bag

Bag of white bread slices, approximately half full

Bag of wheat bread slices, approximately 3/4 full

103g - Storing Food (continued)

Plan of Correction**Accept**

Staff will be trained on the proper storage of food. An airtight storage container will be purchased to store bread and buns.

Completion Date: 06/15/2021

Document Submission**Implemented**

This correction has already been completed. If you would like images sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

183d - Prescription Current

1. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On 4/14/2021, [REDACTED] prescribed for residents #1, #2, #4, and #5, was in the home's medication cart; however, the medication was expired.

Also, on 4/14/2021, a vial of [REDACTED], prescribed for resident #3, was in the home's kitchen refrigerator; however, this medication expired on 4/13/2021.

Plan of Correction**Accept**

All outdated medication was removed from facility. A monthly review of the medication cart will be done to assure all outdated medication is discarded and replaced if needed. All staff will have medication administration training.

Completion Date: 06/15/2021

Document Submission**Implemented**

This correction has already been completed. If you would like documents sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2 is prescribed [REDACTED], take one tablet every 8 hours as needed; however, this medication is not available in the home.

Resident #5 is prescribed [REDACTED], take one capsule by mouth once a day as needed; however, this medication is not available in the home.

Plan of Correction**Accept**

Medication was ordered from pharmacy immediately. A monthly review of the medication cart and MAR to MAR will be done to assure all prescribed medication are in the facility and available.

Completion Date: 06/15/2021

185a - Implement Storage Procedures (*continued*)**Document Submission****Implemented**

This correction has already been completed. If you would like documents sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site at this time.

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed [REDACTED], inject subquetaneously before meals per sliding scale:

151-200 = 2 units

201-250 = 4 units

251-300 = 6 units

301-350 = 8 units

351-400 = 10 units

>400 = 12 units

On 4/8/2021 at 8:00 a.m., resident #1's blood glucose reading was 302. The resident was administered 6 units; however, the resident should have received 8 units.

On 4/9/2021 at 12:00 p.m., resident #1's blood glucose reading was 386. The resident was administered 12 units; however, the resident should have received 10 units.

Plan of Correction**Accept**

All staff will be trained on medication administration and have a review of the diabetic training.

Audit of MAR- looking at glucometer reading versus the insulin that was given.

Documentation will be kept.

Completion Date: 06/20/2021

Document Submission**Implemented**

This correction has already been completed. If you would like documents sent to you proving this, we will gladly do so, however I am unable to attach items via this sanswrite site.