

Department of Human Services
Bureau of Human Service Licensing

October 19, 2021

[REDACTED]
VALLEY MEDICAL FACILITIES INC
[REDACTED]
[REDACTED]

RE: THE RESIDENCE AT WILLOW LANE
30 HECKEL ROAD
MCKEES ROCKS, PA, 15136
LICENSE/COC#: 45191

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/30/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *THE RESIDENCE AT WILLOW LANE* License #: *45191* License Expiration Date: *07/01/2022*
Address: *30 HECKEL ROAD, MCKEES ROCKS, PA 15136*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *412-331-1820* Email: [REDACTED]

Legal Entity

Name: *VALLEY MEDICAL FACILITIES INC*

Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *09/26/1997* Issued By: *Labor and Industry*
Type: *Other* Date: *04/30/2021* Issued By: *Allegheny County Health Department*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *79* Waking Staff: *59*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint,Incident* Exit Conference Date: *09/30/2021*

Inspection Dates and Department Representative

09/30/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *107* Residents Served: *49*

Secured Dementia Care Unit

In Home: *Yes* Area: *Pathways* Capacity: *17* Residents Served: *11*

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *49*
Diagnosed with Mental Illness: *20* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *30* Have Physical Disability: *0*

Inspections / Reviews

09/30/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *10/15/2021*

10/8/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *10/12/2021*

10/12/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *10/14/2021*

10/19/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation, dated [REDACTED]/21, does not include the resident's height. This section of the form is blank.

Plan of Correction**Accept**

The Assistant Director of Resident Care Services obtained a completed DME, to include resident height on [REDACTED]/2021. To assure that no other residents are affected, the Director of Resident Care Services will complete review of all current resident DME's for completion accuracy. Identified deficiencies were corrected upon notation, by 10/13/2021. To prevent this from happening in the future the Director of Resident Care Services will provide education to all Resident Care Leadership responsible for guiding physicians with completion of DME's in accordance with 2600.141.b requirements by 10/13/2021. Director of Resident Care Services will audit newly completed DMEs daily for 7 days (10/13-14-15-16-17-18-19/2021), weekly thereafter for 3 weeks (10/20-26; 10-27-11/2; and 11/3-9), and monthly thereafter, identified deficient practices will be addressed upon notation. Auditing will be reported through QAPI for review and or recommendation, ongoing.

Completion Date: 11/09/2021

Document Submission**Implemented**

Obtained a completed DME, documentation submitted; Provided education to all Resident Care Leadership responsible for guiding physicians with completion of DME's in accordance with 2600.141.b, documentation submitted.

187b - Date/Time of Medication Admin.

1. Requirements

2600.

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

Description of Violation

Resident #1 was prescribed Alprazolam 0.5mg-Take 1 tablet orally twice daily at 8:00 am and 2:00 pm; however, this medication was not initialed as administered on the resident's September 2021 medication administration record at 2:00 pm on 9/2/21 and 9/4/21.

Plan of Correction**Accept**

Unable to correct past occurrences. To prevent the practice from recurring, the Certified Medication Trainer will educate Medication Technicians on regulation 2600.187 to include documentation requirements of medication administration by 10/13/2021. Director of Resident Care Services will audit the Missed Medication Report daily for 7 days (10/13-14-15-16-17-18-19/2021), weekly thereafter for 3 weeks (10/20-26; 10-27-11/2; and 11/3-9), and monthly thereafter, identified deficient practices will be addressed upon notation. Auditing will be reported through QAPI for review and or recommendation, ongoing.

Completion Date: 10/09/2021

187b - Date/Time of Medication Admin. *(continued)***Document Submission****Implemented**

Certified Medication Trainer will educate Medication Technicians on regulation 2600.187 to include documentation requirements of medication administration, documentation submitted.

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 Acetaminophen 500mg-Take 1 tablet orally 3 times daily for pain; however, the afternoon and evening doses were not administered to the resident on 9/6/21, because the medication was not available in the home for administration.

Resident #1 is prescribed Furosemide-20mg Tablet-Take 1 tablet orally daily; however, this medication was not administered to the resident on 9/2/21 and 9/16/21, because it was not available in the home for administration.

REPEAT VIOLATION: 1/25/2021, et. al.

Plan of Correction**Directed**

Resident R#1 Acetaminophen and Furosemide was not available for administration due to delayed pharmacy delivery. Delivery was delayed due to untimely physician orders. Medication Error reports and notifications to responsible party and physicians will be completed.

Director of Resident Care Services will complete a 7 day look back of MARs to identify any missed medication administrations due to availability.

To prevent the practice from recurring, Director of Resident Care Services and Executive Director will provide education to attending physicians regarding regulation 2600.187 and timeliness of prescription management. If an attending physician does not respond to care requests in a reasonable time frame, the Medical Director will intervene. Certified Medication Trainer will educate Medication Technicians and Supervisors on regulation 2600.187 to, include following the directions of the prescriber, and contact of Medical Director when needed, by 10/13/2021. (DIRECTED: Documentation of the education shall be kept. LM 10/12/21)

STEP 4

Director of Resident Care Services will audit the Medication Exceptions, Variance and Missed Medications Reports daily for 7 days (10/13-14-15-16-17-18-19/2021), weekly thereafter for 3 weeks (10/20-26; 10-27-11/2; and 11/3-9), and monthly thereafter, identified deficient practices will be addressed upon notation. Auditing will be reported through QAPI for review and or recommendation, ongoing.

DIRECTED: Within 24 hours of receipt of the plan of correction: Resident #1's Acetaminophen and Furosemide shall be available in the home for administration, unless discontinued in writing by the prescriber. LM 10/12/21

Completion Date: 11/09/2021

187d - Follow Prescriber's Orders *(continued)***Document Submission****Implemented**

Medication Error reports and notifications to responsible party and physicians will be completed, documentation submitted; Resident #1's Acetaminophen and Furosemide were made available in the home for administration, documentation submitted; A 7 day look back of MARs was completed to identify any missed medication administrations, with corrective action as identified, documentation submitted; Education was provided to attending physicians regarding regulation 2600.187 and timeliness of prescription management. documentation submitted; Medication Technicians and Supervisors were educated on regulation 2600.187 to, include following the directions of the prescriber, and contact of Medical Director when needed, documentation submitted.