

Department of Human Services
Bureau of Human Service Licensing

November 7, 2022

[REDACTED]
SUGAR VALLEY LODGE INC
[REDACTED]

RE: SUGAR VALLEY LODGE (SILVER OAK
BUILDING)
158 SUGAR VALLEY LANE
FRANKLIN, PA, 16323
LICENSE/COC#: 44771

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/08/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: SUGAR VALLEY LODGE (SILVER OAK BUILDING) License #: 44771 License Expiration: 08/10/2022
Address : 158 SUGAR VALLEY LANE, FRANKLIN, PA 16323
County: VENANGO Region: WESTERN

Administrator

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

Legal Entity

Name: SUGAR VALLEY LODGE INC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 05/20/2016 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 15 Waking Staff: 11

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 04/08/2022

Inspection Dates and Department Representative

04/08/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 15 Residents Served: 15

Secured Dementia Care Unit

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

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 15	Are 60 Years of Age or Older: 11
Diagnosed with Mental Illness: 14	Diagnosed with Intellectual Disability: 3
Have Mobility Need: 0	Have Physical Disability: 0

Inspections / Reviews

04/08/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/15/2022

Inspections / Reviews (*continued*)

06/06/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 09/23/2022
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/08/2022

06/16/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 09/23/2022
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 06/23/2022

11/07/2022 - Document Submission

Submitted By: [REDACTED] Date Submitted: 09/23/2022
Reviewer: [REDACTED] Follow-Up Type: Not Required

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

The home's licensing inspection summary (LIS), dated 5/12/21, was not posted in a conspicuous and public place in the home.

POC Submission

Accept

04/08/2022, IMMEDIATLEY INSPECTION SUMMARY WAS HUNG IN A PUBLIC PLACE. NOW AND IN THE FUTURE NEW VIOLATION REPORTS WILL BE HUNG IMMEDIATLEY IN A PUBLIC ARE IN HOME. ADMINISTRATION WILL CHECK MONTHLY TO ENSURE ALL REQUIRED ITEMS ARE POSTED.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission

Implemented ([REDACTED] - 11/07/2022)

04/08/2022, IMMEDIATLEY INSPECTION SUMMARY WAS HUNG IN A PUBLIC PLACE. NOW AND IN THE FUTURE NEW VIOLATION REPORTS WILL BE HUNG IMMEDIATLEY IN A PUBLIC ARE IN HOME. ADMINISTRATION WILL CHECK MONTHLY TO ENSURE ALL REQUIRED ITEMS ARE POSTED.

Licensee's Proposed Overall Completion Date: 06/20/2022

103g - Storing Food

2. Requirements

2600.

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

Description of Violation

A pan of cake, approximately 1/5 full in the food pantry was opened and unsealed.

POC Submission

Accept

CAKE WAS DISPOSED OF IMMEDIATLEY ON 04/08/2022 AND TRAINING WITH ALL DIETARY STAFF WAS COMPLETED ON 04/27/2022 BY ADMINISTRATOR JEANNE DICKINSON. ALL DIETARY STAFF WAS TRAINED ON THE PROPER FOOD STORAGE. NOW AND IN THE FUTURE ALL FOOD WILL BE STORED PROPERLY AND OR ENCLOSED OR SEALED CONTAINERS. SEE ATTACHED DOCUMENT.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission

Implemented ([REDACTED] 11/07/2022)

CAKE WAS DISPOSED OF IMMEDIATLEY ON 04/08/2022 AND TRAINING WITH ALL DIETARY STAFF WAS COMPLETED ON 04/27/2022 BY ADMINISTRATOR JEANNE DICKINSON. ALL DIETARY STAFF WAS TRAINED ON THE PROPER FOOD STORAGE. NOW AND IN THE FUTURE ALL FOOD WILL BE STORED PROPERLY AND OR ENCLOSED OR SEALED CONTAINERS. SEE ATTACHED DOCUMENT.

Licensee's Proposed Overall Completion Date: 09/23/2022

141a - Medical Evaluation

3. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

141a - Medical Evaluation (continued)

Description of Violation

Resident #1 was admitted to home on [REDACTED]/21. However, the medical evaluation was completed on [REDACTED]/21.

POC Submission

Accept

HOUSE AUDIT COMPLETED ON 04/11/2022 TO ENSURE ALL MEDICAL EVALUATIONS WERE WITHIN GUIDELINES. UPON ADMISSION TWO ADMINISTRATORS WILL REVIEW THE ADMISSION PAPERWORK TO ENSURE IT IS COMPLETED PROPERLY.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission

Implemented ([REDACTED] 11/07/2022)

HOUSE AUDIT COMPLETED ON 04/11/2022 TO ENSURE ALL MEDICAL EVALUATIONS WERE WITHIN GUIDELINES. UPON ADMISSION TWO ADMINISTRATORS WILL REVIEW THE ADMISSION PAPERWORK TO ENSURE IT IS COMPLETED PROPERLY.

Licensee's Proposed Overall Completion Date: 09/23/2022

183e - Storing Medications

4. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

Resident #2's [REDACTED] was opened on [REDACTED]/22. According to the manufacturer's instructions, opened vials must be discarded if not used within 28 days. However, resident #2 received [REDACTED] 22 and [REDACTED] 22.

POC Submission

Accept

ON 04/08/2022 THE OUTDATED INSULIN WAS DISCARDED IMMEDIATLEY.ALL INSULIN WAS EXAMINED FOR OPEN DATES. NO OTHER INSULIN WAS FOUND TO BE EXPIRED. ALL INSULIN BOTTLES AND OR PENS ARE LABELED WITH OPENING DATES AND DISCARD DATES. INSULIN TO BE MONITORED FOR OPEN/DISCARD DATES BY THE DIRECTOR OF NURSING JUDY COCHRAN. ALL STAFF WILL BE INSERVICED ON 05/18/2022 ON PROPER STORAGE OF INSULIN. ANNUAL DIABETIC TRAINING IS SCHEDULED FOR 08/03/2022 UPMC HAMOT (AMY SIMON) WILL INSTRUCT.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission

Implemented ([REDACTED] - 11/07/2022)

ON 04/08/2022 THE OUTDATED INSULIN WAS DISCARDED IMMEDIATLEY.ALL INSULIN WAS EXAMINED FOR OPEN DATES. NO OTHER INSULIN WAS FOUND TO BE EXPIRED. ALL INSULIN BOTTLES AND OR PENS ARE LABELED WITH OPENING DATES AND DISCARD DATES. INSULIN TO BE MONITORED FOR OPEN/DISCARD DATES BY THE DIRECTOR OF NURSING JUDY COCHRAN. ALL STAFF WILL BE INSERVICED ON 05/18/2022 ON PROPER STORAGE OF INSULIN. ANNUAL DIABETIC TRAINING IS SCHEDULED FOR 08/03/2022 UPMC HAMOT (AMY SIMON) WILL INSTRUCT.

Licensee's Proposed Overall Completion Date: 09/23/2022

184a - Resident's Meds Labeled

5. Requirements

2600.

184a - Resident's Meds Labeled (continued)

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

Description of Violation

Resident #2 is prescribed [REDACTED] However, the pharmacy label for resident #2's [REDACTED] does not include the dosage.

In addition, resident #2 is prescribed [REDACTED]. However, the pharmacy label for resident #2's [REDACTED] does not include the dosage.

POC Submission**Accept**

ALL MED ROOM STAFF WILL HAVE TRAINING (REGULATION 2600.16(184A)) ON MAY 18, 2022. STAFF WILL CONTACT PHARMACY TO OBTAIN A NEW LABEL FOR MEDICATION OR A NEW PACKAGE OF MEDICATION WITH THE CORRECT INFORMATION,STAFF WILL RECORD ALL MEDICATION CHANGES AND OR NEW MEDICATION ON A MEDICATION CHANGE LOG. THE DIRECTOR OF NURSING (JUDY COCHRAN) WILL REVIEW THE LOG INITIATIONALLY THEN WEEKLY THEREAFTER. CHANGES WILL TAKE AFFECT IMMEDIATLEY.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission**Implemented ([REDACTED] 11/07/2022)**

ALL MED ROOM STAFF WILL HAVE TRAINING (REGULATION 2600.16(184A)) ON MAY 18, 2022. STAFF WILL CONTACT PHARMACY TO OBTAIN A NEW LABEL FOR MEDICATION OR A NEW PACKAGE OF MEDICATION WITH THE CORRECT INFORMATION,STAFF WILL RECORD ALL MEDICATION CHANGES AND OR NEW MEDICATION ON A MEDICATION CHANGE LOG. THE DIRECTOR OF NURSING (JUDY COCHRAN) WILL REVIEW THE LOG INITIATIONALLY THEN WEEKLY THEREAFTER. CHANGES WILL TAKE AFFECT IMMEDIATLEY.

Licensee's Proposed Overall Completion Date: 09/23/2022

185a - Implement Storage Procedures**6. 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 ordered blood glucose checks three times day; however, on the following dates and times the glucometer does not match the resident's April 2022 medication administration record (MAR):

[REDACTED] /22 at [REDACTED] a.m., the glucometer read [REDACTED] however MAR indicated [REDACTED]
 [REDACTED] /22 at [REDACTED] p.m., the glucometer read [REDACTED] however MAR indicated [REDACTED]
 [REDACTED] /22 at [REDACTED] p.m., the glucometer read [REDACTED]; however MAR indicated [REDACTED]

Resident #3 is ordered blood glucose checks twice daily; however, on the following dates and times the glucometer does not match the resident's April 2022 MAR:

[REDACTED] /22 at [REDACTED] p.m., the glucometer read [REDACTED] however MAR indicated [REDACTED]
 [REDACTED] /22 at [REDACTED] a.m., the glucometer read [REDACTED] however MAR indicated [REDACTED]
 [REDACTED] /22 at [REDACTED] a.m., the glucometer read [REDACTED]; however MAR indicated [REDACTED]

Resident # 4's Easy Max glucometer is not calibrated to correct date. On 4/8/22, the glucometer indicated 4/7/22.

Repeat Violation: 5/12/21

185a - Implement Storage Procedures (continued)

POC Submission

Accept

STAFF WILL RECEIVE TRAINING ON 05/18/2022 ON PROPER DOCUMENTATION. DIRECTOR OF NUSING (JUDY COCHRAN) WILL REVIEW INDIVIDUALLY AND PROVIDE ONGOING TRAINING AS NEEDED. ANNUAL DIABETIC TRAINING IS SCHEDULES FOR 08/03/2022. UPMC HAMOT (AMY SIMONS INSTRUCTOR) DIRECTOR OF NURSING WILL REVIEW ENTRIES DAILY FOR TWO MONTHS THEN WEEKLY FOR ONE MONTH THEN ONCE A MONTH ONGOING. STAFF TRAINING AND ALL AUDITS WILL BE DOCUMENTED FOR DEPARTMENTS REVIEW. RESIDENT #4 GLUCOMETER WILL BE CHECKED MONTHLY FOR CORRECT CALIBRATION (DATE). NOW AND IN THE FUTURE WHEN BATTERIES ARE CHANGED ALL GLUCOMETERS WILL BE CHECKED FOR PROPER CALIBRATION, DIRECT CARE STAFF WILL DOCUMENT IN ELECTRONIC MAR'S. ANT ISSUES WITH CALIBRATION WILL BE REPORTED TO THE DIRECTOR OF NURSING.

Licensee's Proposed Overall Completion Date: 06/07/2022

Document Submission

Implemented ([REDACTED] - 11/07/2022)

STAFF WILL RECEIVE TRAINING ON 05/18/2022 ON PROPER DOCUMENTATION. DIRECTOR OF NUSING (JUDY COCHRAN) WILL REVIEW INDIVIDUALLY AND PROVIDE ONGOING TRAINING AS NEEDED. ANNUAL DIABETIC TRAINING IS SCHEDULES FOR 08/03/2022. UPMC HAMOT (AMY SIMONS INSTRUCTOR) DIRECTOR OF NURSING WILL REVIEW ENTRIES DAILY FOR TWO MONTHS THEN WEEKLY FOR ONE MONTH THEN ONCE A MONTH ONGOING. STAFF TRAINING AND ALL AUDITS WILL BE DOCUMENTED FOR DEPARTMENTS REVIEW. RESIDENT #4 GLUCOMETER WILL BE CHECKED MONTHLY FOR CORRECT CALIBRATION (DATE). NOW AND IN THE FUTURE WHEN BATTERIES ARE CHANGED ALL GLUCOMETERS WILL BE CHECKED FOR PROPER CALIBRATION, DIRECT CARE STAFF WILL DOCUMENT IN ELECTRONIC MAR'S. ANT ISSUES WITH CALIBRATION WILL BE REPORTED TO THE DIRECTOR OF NURSING.

Licensee's Proposed Overall Completion Date: 09/23/2022

187d - Follow Prescriber's Orders

7. Requirements

- 2600.
- 187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed [REDACTED]

[REDACTED] Call doctor if over 450.
On [REDACTED] /22 at [REDACTED] p.m., resident #2's blood glucose reading was [REDACTED] and should have received 8 units. However, the resident was administered 0 units.

POC Submission

Accept

IMMEDIATLEY ON 04/08/2022 THE DIRECTOR OF NURSING OR DESIGNATED STAFF PERSON QUALIFIED TO ADMINISTER MEDICATIONS WILL COMPLETE AN INITIAL AND WEEKLY AUDIT FOR THREE MONTHS OF THE GLUCOMETER READINGS AND COVERAGE. MEDICATION ADMINISTRATION RECORDS AND PERSCRIPTION ORDERS TO ENSURE THE PHYSICIAN ORDERS ARE PROPERLY DOCUMENTED AND FOLLOWED.

187d - Follow Prescriber's Orders (continued)

DOCUMENTATION OF AUDITS SHALL BE KEPT. IMMEDIATLEY THE DIRECTOR OF NURSING WILL REPORT ANY MEDICATION ERRORS TO THE DEPARTMENT IN ACCORDANCE WITH REGULATION 2600.16 187D.

DOCUMENTATION SHALL BE KEPT ALL STAFF PERSONS QUALIFIED TO ADMINISTOR MEDICATIONS WILL BE RE-EDUCATED ON MEDICATION ADMINISTRATION IN SEPTEMBER 2022 AND DIABETIC EDUCATION IS SCHEDULED FOR 08/03/2022 BY UPMC HAMOT (AMY SIMONS) WILL ENCLUDE THE IMPORTANCE OF FOLLOWING PERSCRIBERS ORDERS AND DOCUMENTATION. DOCUMENTATION OF TRAININGS SHALL BE KEPT IN STAFF RECORDS.

Licensee's Proposed Overall Completion Date: 05/10/2022

Document Submission

Implemented ([REDACTED] 11/07/2022)

IMMEDIATLEY ON 04/08/2022 THE DIRECTOR OF NURSING OR DESIGNATED STAFF PERSON QUALIFIED TO ADMINISTER MEDICATIONS WILL COMPLETE AN INITIAL AND WEEKLY AUDIT FOR THREE MONTHS OF THE GLUCOMETER READINGS AND COVERAGE. MEDICATION ADMINISTRATION RECORDS AND PERSCRIPTION ORDERS TO ENSURE THE PHYSICIAN ORDERS ARE PROPERLY DOCUMENTED AND FOLLOWED. DOCUMENTATION OF AUDITS SHALL BE KEPT. IMMEDIATLEY THE DIRECTOR OF NURSING WILL REPORT ANY MEDICATION ERRORS TO THE DEPARTMENT IN ACCORDANCE WITH REGULATION 2600.16 187D. DOCUMENTATION SHALL BE KEPT ALL STAFF PERSONS QUALIFIED TO ADMINISTOR MEDICATIONS WILL BE RE-EDUCATED ON MEDICATION ADMINISTRATION IN SEPTEMBER 2022 AND DIABETIC EDUCATION IS SCHEDULED FOR 08/03/2022 BY UPMC HAMOT (AMY SIMONS) WILL ENCLUDE THE IMPORTANCE OF FOLLOWING PERSCRIBERS ORDERS AND DOCUMENTATION. DOCUMENTATION OF TRAININGS SHALL BE KEPT IN STAFF RECORDS.

Licensee's Proposed Overall Completion Date: 09/23/2022