

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

Facility Information

Name: *TRI-COUNTY RESPITE-QUAKERTOWN HOUSE* License #: *12681* License Expiration: *05/21/2023*
Address: *219 EAST BROAD STREET, QUAKERTOWN, PA 18951*
County: *BUCKS* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *TRI-COUNTY RESPITE INC*
Address: *219 EAST BROAD STREET, QUAKERTOWN, PA, 18951*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *01/10/1989* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *45* Waking Staff: *34*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *04/27/2022*

Inspection Dates and Department Representative

04/26/2022 - On-Site: [REDACTED]
04/27/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *65* Residents Served: *41*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *15* Are 60 Years of Age or Older: *17*
Diagnosed with Mental Illness: *41* Diagnosed with Intellectual Disability: *4*
Have Mobility Need: *4* Have Physical Disability: *0*

Inspections / Reviews

04/26/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/21/2022*

Inspections / Reviews (*continued*)

05/27/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *06/01/2022*

06/03/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *07/01/2022*

06/29/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

144d - Smoking Outside

1. Requirements

2600.
144.d. Smoking outside of the smoking room is prohibited.

Description of Violation

On 04/26/2022 at 10:00 AM, many cigarette butts were observed scattered on the steps leading to the basement exit to the alley which is not the home's designated smoking area. The home's designated smoking areas are an indoor smoking room and the side courtyard.

Plan of Correction

Accept

Residents are counseled every time they are observed violating the home rules, including our home rule on smoking. When necessary, residents as a community are reminded of our smoking rules/policy during resident council meetings that are held monthly. In addition, we have installed cameras at the exits and entrances of the home, which is where cigarette butts were found, for additional monitoring (we have also posted signs to alerting individuals to the cameras, so they are aware the area is under surveillance). The surveillance camera in this exterior area of the home has been configured to provide alerts when an individual is in the area. The alert will go to the "supervisor on duty" tablet. The supervisor on duty will check the alert and respond if a resident is smoking in that area. Staff will also walk the grounds during each change of shift to ensure smoking is not occurring in non-designated areas; staff will report out during shift change and this will be documented on our change of shift report. Continued infractions of home rules by a resident(s) will result in follow up action up to and including a 30-day notice.

Document Submission

Implemented

Residents are counseled every time they are observed violating the home rules, including our home rule on smoking. When necessary, residents as a community are reminded of our smoking rules/policy during resident council meetings that are held monthly. In addition, we have installed cameras at the exits and entrances of the home, which is where cigarette butts were found, for additional monitoring (we have also posted signs to alerting individuals to the cameras, so they are aware the area is under surveillance). The surveillance camera in this exterior area of the home has been configured to provide alerts when an individual is in the area. The alert will go to the "supervisor on duty" tablet. The supervisor on duty will check the alert and respond if a resident is smoking in that area. Staff will also walk the grounds during each change of shift to ensure smoking is not occurring in non-designated areas; staff will report out during shift change and this will be documented on our change of shift report. Continued infractions of home rules by a resident(s) will result in follow up action up to and including a 30-day notice.

183e - Storing Medications

1. 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

On 04/27/2022, resident #1's [REDACTED] was opened but not dated. According to the manufacturer's instructions, the pen should be discarded 28 days after being opened.

Plan of Correction

Accept

All med techs will be remediated on how to properly label medications, including insulin pens, by or before our next monthly med tech meeting on June 14, 2022.
The medication, Aspart Flexpen, was opened while the resident was on a home visit. Moving forward, one med tech will pack a resident's meds according to their Physicians orders/LOA form from eMAR; if the resident will take

183e - Storing Medications (continued)

medication from a new/unopened package while on an LOA, the label with the start date and staff persons initials will be added to the medication prior to it being packed. Once packed, a second med tech will check all meds and compare to the Physicians orders/LOA form from eMAR. Both med techs will be responsible for signing off on the medication LOA form. Upon return from the LOA, two med techs will be responsible for checking, counting, and signing the medications back in.

Document Submission

Implemented

All med techs will be remediated on how to properly label medications, including insulin pens, by or before our next monthly med tech meeting on June 14, 2022.

The medication, [REDACTED], was opened while the resident was on a home visit. Moving forward, one med tech will pack a resident's meds according to their Physicians orders/LOA form from eMAR; if the resident will take medication from a new/unopened package while on an LOA, the label with the start date and staff persons initials will be added to the medication prior to it being packed. Once packed, a second med tech will check all meds and compare to the Physicians orders/LOA form from eMAR. Both med techs will be responsible for signing off on the medication LOA form. Upon return from the LOA, two med techs will be responsible for checking, counting, and signing the medications back in.,

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 #2 is prescribed [REDACTED] every evening but this medication was not signed out on the narcotics control record on 04/16/2022. However, staff initialed the MAR as having administered the medication.

Resident #3 is prescribed [REDACTED] at 08:00 AM every day but this medication was not signed out on the narcotics control record on 04/02/2022. However, staff initialed the MAR as having administered the medication.

Plan of Correction

Accept

Med Tech directly involved retook the medication administration training on May 5, 2022, for remediation. Our Med Room Policy has been updated to promote medication safety and minimize the risk of errors. To prevent recurrence all med techs will review and sign off on the Med Room Policy prior to their next shift and will together review the entire Med Room Policy document during our next Med Room meeting on June 14, 2022. Additionally, the med room policy document will be reviewed by all med techs on an annual basis.

An audit of the MAR will be conducted by the on-coming and off-going med techs to identify errors. Errors will immediately be communicated to the Administrator or designee.

The Residential Director and Director of Wellness will audit the residents-controlled meds and forms minimally 2x/week.

Document Submission

Implemented

Med Tech directly involved retook the medication administration training on May 5, 2022, for remediation. Our Med Room Policy has been updated to promote medication safety and minimize the risk of errors. To prevent recurrence all med techs will review and sign off on the Med Room Policy prior to their next shift and will together review the entire Med Room Policy document during our next Med Room meeting on June 14, 2022. Additionally, the med room policy document will be reviewed by all med techs on an annual basis.

187b - Date/Time of Medication Admin. (continued)

An audit of the MAR will be conducted by the on-coming and off-going med techs to identify errors. Errors will immediately be communicated to the Administrator or designee.
 The Residential Director and Director of Wellness will audit the residents-controlled meds and forms minimally 2x/week..

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] after lunch and dinner. However, during a medication administration observation on 04/26/2022 at 12:35 PM , resident #1 was administered this med before [REDACTED] lunch.
 Resident #2 is prescribed [REDACTED] every evening. However, this medication was not administered on 04/16/2022.
 Resident #3 is prescribed [REDACTED] at 08:00 AM every day. However, this medication was not administered on 04/02/2022.

Plan of Correction

Accept

The person directly involved with the medication error for resident #1 has been relieved of all duties as a Medication Technician. The importance of following the prescribers order for medication administration was reviewed with all Medication Technicians during the monthly med tech meeting on 5/10/22. All med techs will have an observed med pass by a Med Tech trainer by June 30, 2022.
 Review of Med Room Policy will occur at our monthly med room meetings and specific areas covered will be documented in meeting minutes.
 MARS will be audited prior to the end of each shift with two medication technicians (incoming and outgoing). The shift supervisor will conduct random med room audits and document accordingly. The Residential Director and Director of Wellness will audit the residents-controlled meds and forms minimally 2x/week.
 In addition, we contracted with a licensed Pharmacist who will be conducting audits over the next three months to determine further course of action as needed.

Document Submission

Implemented

The person directly involved with the medication error for resident #1 has been relieved of all duties as a Medication Technician. The importance of following the prescribers order for medication administration was reviewed with all Medication Technicians during the monthly med tech meeting on 5/10/22. All med techs will have an observed med pass by a Med Tech trainer by June 30, 2022..
 Review of Med Room Policy will occur at our monthly med room meetings and specific areas covered will be documented in meeting minutes.
 MARS will be audited prior to the end of each shift with two medication technicians (incoming and outgoing). The shift supervisor will conduct random med room audits and document accordingly. The Residential Director and Director of Wellness will audit the residents-controlled meds and forms minimally 2x/week.
 In addition, we contracted with a licensed Pharmacist who will be conducting audits over the next three months to determine further course of action as needed.

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

Facility Information

Name: *TRI-COUNTY RESPITE-QUAKERTOWN HOUSE* License #: *12681* License Expiration: *05/21/2023*
Address: *219 EAST BROAD STREET, QUAKERTOWN, PA 18951*
County: *BUCKS* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *TRI-COUNTY RESPITE INC*
Address: *219 EAST BROAD STREET, QUAKERTOWN, PA, 18951*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *01/10/1989* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *45* Waking Staff: *34*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *07/08/2022*

Inspection Dates and Department Representative

07/08/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *65* Residents Served: *41*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *17* Are 60 Years of Age or Older: *15*
Diagnosed with Mental Illness: *41* Diagnosed with Intellectual Disability: *4*
Have Mobility Need: *4* Have Physical Disability: *0*

Inspections / Reviews

07/08/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND