

Department of Human Services
Bureau of Human Service Licensing

July 25, 2022

[REDACTED], ADMINISTRATOR
[REDACTED]
[REDACTED]
[REDACTED]

RE: JAMESON PLACE
3345 WILMINGTON ROAD
NEW CASTLE, PA, 16105
LICENSE/COC#: 40128

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/10/2022, 05/11/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

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: *JAMESON PLACE* License #: *40128* License Expiration: *08/23/2022*
Address: *3345 WILMINGTON ROAD, NEW CASTLE, PA 16105*
County: *LAWRENCE* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *JAMESON CARE CENTER, INC.*
Address: *3345 WILMINGTON ROAD, NEW CASTLE, PA, 16105*
Phone: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *03/03/1998* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *28* Waking Staff: *21*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *05/11/2022*

Inspection Dates and Department Representative

05/10/2022 - On-Site: [REDACTED]
05/11/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *71* Residents Served: *28*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *28*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

05/10/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/11/2022*

Inspections / Reviews (*continued*)

06/22/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *06/27/2022*

07/12/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *07/15/2022*

07/25/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103g - Storing Food

1. Requirements

2600.
103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On 5/10/22, there was an unsealed plastic bag containing 8 veal patties and an unsealed plastic bag containing 7 fish fillets in the walk in freezer.

Plan of Correction

Accept

On the day of inspection, 5-10-22, the bags were removed immediately from the freezer and discarded. Dietary staff were also educated on the importance of proper food storage, how to store food properly and labeling. Wayne Cioffi, Dietary manager, will monitor his staff for compliance.

Dietary manager, Wayne Cioffi, completed the education of his staff on 6-1-22. Monitoring began on 5-17-22. A copy of the weekly freezer monitor log has been included with this POC.

Completion Date: 06/01/2022

Document Submission

Implemented

On the day of inspection, 5-10-22, the bags were removed immediately from the freezer and discarded. Dietary staff were also educated on the importance of proper food storage, how to store food properly and labeling. Wayne Cioffi, Dietary manager, will monitor his staff for compliance.

Dietary manager, Wayne Cioffi, completed the education of his staff on 6-1-22. Monitoring began on 5-17-22. A copy of the weekly freezer monitor log has been included with this POC.

103i - Outdated Food

1. Requirements

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

On 5/10/22, there was an unlabeled and undated plastic bag containing 8 veal patties and an unlabeled and undated plastic bag containing 7 fish fillets in the walk in freezer.

Plan of Correction

Accept

On the day of inspection, 5-10-22, the bags were removed immediately from the freezer and discarded. Dietary staff were educated immediately on the importance of proper food storage, how to store food properly and labeling. Wayne Cioffi, Dietary manager, will monitor his staff for compliance.

Dietary manager, [REDACTED], completed the education of [REDACTED] staff on 6-1-22. Monitoring began on 5-17-22. A copy of the weekly freezer monitor log has been included with this POC.

Completion Date: 06/01/2022

Document Submission

Implemented

On the day of inspection, 5-10-22, the bags were removed immediately from the freezer and discarded. Dietary staff were educated immediately on the importance of proper food storage, how to store food properly and labeling. [REDACTED], Dietary manager, will monitor his staff for compliance.

Dietary manager, [REDACTED] completed the education of [REDACTED] staff on 6-1-22. Monitoring began on 5-17-22. A

103i - Outdated Food (continued)

copy of the weekly freezer monitor log has been included with this POC.

141a - Medical Evaluation**1. 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.

Description of Violation

Resident #1's initial medical evaluation, dated [REDACTED], was completed 64 days prior to the resident's admission to the home on 6/24/21.

Resident #2 was admitted to the home on [REDACTED]. However, the resident's initial medical evaluation does not indicate the date the resident was evaluated. This section is blank.

Plan of Correction**Accept**

Resident 1's move in date was delayed due to illness. Effective immediately I will review all incoming paperwork, including DME's, prior to admission to ensure guidelines are met.

I will also review all incoming resident paperwork to ensure completion. Our LPN will assist in this and will follow up with the physicians if more information is needed. I have attached the DME with the date of evaluation.

Residents #2's evaluation date was confirmed by calling the doctors office and speaking to the office staff to obtain the date of appointment. Our LPN, [REDACTED], and myself, [REDACTED], are evaluating the paperwork. The monitoring began the date of inspection, 5-11-22.

Completion Date: 05/11/2022

Document Submission**Implemented**

Resident 1's move in date was delayed due to illness. Effective immediately I will review all incoming paperwork, including DME's, prior to admission to ensure guidelines are met.

I will also review all incoming resident paperwork to ensure completion. Our LPN will assist in this and will follow up with the physicians if more information is needed. I have attached the DME with the date of evaluation.

Residents #2's evaluation date was confirmed by calling the doctors office and speaking to the office staff to obtain the date of appointment. Our LPN, [REDACTED], and myself, [REDACTED], are evaluating the paperwork. The monitoring began the date of inspection, 5-11-22.

141a 1-10 Medical Evaluation Information**1. Requirements**

2600.

141a 1-10 Medical Evaluation Information (continued)

- 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. The evaluation must include the following:
1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
 4. Special health or dietary needs of the resident.
 5. Allergies.
 6. Immunization history.
 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
 8. Body positioning and movement stimulation for residents, if appropriate.
 9. Health status.
 10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident #1’s initial medical evaluation, dated [REDACTED] is incomplete. Section 4: Special health or dietary needs and Section 10: Mobility needs assessment are blank.

Plan of Correction

Accept

Effective immediately all DME’s will be reviewed for completion. Our LPN as well as myself will be in charge of this task. I have attached the completed DME.

The office of the physician who completed the DME was contacted for the missing information. This was completed on 6-7-22 by myself, [REDACTED], [REDACTED], LPN, and I have completed the audit of all DME’s for completion. We began on 6-10-22 and we completed the task on 6-15-22.

Completion Date: 06/15/2022

Document Submission

Implemented

Effective immediately all DME’s will be reviewed for completion. Our LPN as well as myself will be in charge of this task. I have attached the completed DME.

The office of the physician who completed the DME was contacted for the missing information. This was completed on 6-7-22 by myself, [REDACTED], [REDACTED], LPN, and I have completed the audit of all DME’s for completion. We began on 6-10-22 and we completed the task on 6-15-22.

141b1 - Annual Medical Evaluation

1. Requirements

2600.
 141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #3’s most recent annual medical evaluation was completed on 10/13/21. However, the resident’s previous evaluation was completed on 10/23/19.

Resident #4’s annual medical evaluation, dated [REDACTED] is incomplete. The resident’s height, weight, pulse rate, ability to self – administer medication, Section 6: Body positioning, Section 4: Special health or dietary needs and Section 10: Mobility needs assessment are blank.

Plan of Correction

Accept

A new electronic medical records system has been installed since 2020 which sends alerts when annual evaluations

141b1 - Annual Medical Evaluation (continued)

are due. Our LPN will monitor the alerts. I will also monitor for completion effective immediately. Effective immediately all DME's will be reviewed for completion. Any missing information will be investigated and completed by the physician or by our LPN. I will also monitor for completion as needed. I have attached the completed DME.

Resident #4's physician was contacted by [REDACTED], LPN, to obtain the missing information. [REDACTED] and I, [REDACTED], Administrator, have completed the DME audit on 6-15-22. The audit will be ongoing as we receive the documents.

Completion Date: 06/15/2022

Document Submission**Implemented**

A new electronic medical records system has been installed since 2020 which sends alerts when annual evaluations are due. Our LPN will monitor the alerts. I will also monitor for completion effective immediately. Effective immediately all DME's will be reviewed for completion. Any missing information will be investigated and completed by the physician or by our LPN. I will also monitor for completion as needed. I have attached the completed DME.

Resident #4's physician was contacted by Vickie Trott, LPN, to obtain the missing information. [REDACTED] Administrator, have completed the DME audit on 6-15-22. The audit will be ongoing as we receive the documents.

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 5/10/11, there was a 60 tablet bottle of [REDACTED] – chew 1 tablet by mouth every six hours as needed, in the medication cart for resident #2. However, the home does not have a prescription for this medication.

Plan of Correction**Accept**

This was a discontinued medication that should have been removed from the med cart. An audit of the cart was completed on 6-11-22 and all medication was reviewed. An audit of all carts will be completed once a week by the med tech in charge on the midnight shift. All outdated or discontinued medications will be removed as needed.

The immediate action was the medication being removed from the cart. [REDACTED], LPN, removed it. All medications that have been discontinued or become outdated are removed and destroyed by the Med Tech on duty at the time of the discontinue order. [REDACTED], LPN, and [REDACTED], Med Tech, completed the cart audit on 6-11-22. The start date for the audits was 6-11-22 and will be ongoing.

Completion Date: 06/11/2022

Document Submission**Implemented**

This was a discontinued medication that should have been removed from the med cart. An audit of the cart was completed on 6-11-22 and all medication was reviewed. An audit of all carts will be completed once a week by the med tech in charge on the midnight shift. All outdated or discontinued medications will be removed as needed.

The immediate action was the medication being removed from the cart. [REDACTED], LPN, removed it. All medications that have been discontinued or become outdated are removed and destroyed by the Med Tech on duty

183d - Prescription Current (continued)

at the time of the discontinue order. [REDACTED], LPN, and [REDACTED], Med Tech, completed the cart audit on 6-11-22. The start date for the audits was 6-11-22 and will be ongoing.

184a - Labeling OTC/CAM**1. Requirements**

2600.

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

4. The prescribed dosage and instructions for administration.

Description of Violation

Resident #1 is prescribed [REDACTED] – Take one oral one time daily for 14 days Starting 5/5/22, ending 5/18/22, then one tablet two times daily. However, the pharmacy label indicates - [REDACTED] – take 1 tablet by mouth every morning for 7 days then take 1 tablet by mouth twice daily.

Resident #2 is prescribed [REDACTED] – 4% topical patch – Apply to affected area every 12 hours- Apply to affected area on 12 hours remove in 12 hours. However, the pharmacy label indicates - [REDACTED] – [REDACTED] to right side in the morning.

Plan of Correction**Accept**

In the case of Resident 1, [REDACTED] are the same medication. I will attach the prescription label that confirms this.

The label on the [REDACTED] box has been corrected to read the same as the prescription. All medication administration staff has been made aware and educated on the correct procedure of administering the patch. I will continue to monitor to ensure proper administration.

Resident #1 medication are the same medication. It is a generic name for the same medication. I attached the label to show this.

Resident #2, the label was corrected by Med Tech, [REDACTED] on 5-11-22. The education to the staff was done by myself, [REDACTED], Administrator, and [REDACTED], LPN, on the day of inspection, 5-11-22. [REDACTED] will continue to monitor by ensuring when a new box is opened that it is labeled properly.

Completion Date: 05/11/2022

Document Submission**Implemented**

In the case of Resident 1, [REDACTED] are the same medication. I will attach the prescription label that confirms this.

The label on the [REDACTED] has been corrected to read the same as the prescription. All medication administration staff has been made aware and educated on the correct procedure of administering the patch. I will continue to monitor to ensure proper administration.

Resident #1 medication are the same medication. It is a generic name for the same medication. I attached the label

184a - Labeling OTC/CAM (continued)

to show this.

Resident #2, the label was corrected by Med Tech, [REDACTED] on 5-11-22. The education to the staff was done by myself, [REDACTED], Administrator, and [REDACTED], LPN, on the day of inspection, 5-11-22. [REDACTED] will continue to monitor by ensuring when a new box is opened that it is labeled properly.

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] – take one tablet one time daily – every Saturday and Sunday. [REDACTED] is also prescribed [REDACTED] take one tablet one time daily – Monday Tuesday, Wednesday, Thursday, Friday. However, the resident's May 2022 medication administration record (MAR) indicates the resident received both the [REDACTED] and the [REDACTED] at bedtime on 5/1/22 through 5/9/22. Staff interviews indicate that [REDACTED] was only administered on 5/1/22, 5/7/22 and 5/8/22 and Coumadin 4mg was administered on 5/2/22 through 5/6/22 and 5/9/22.

Resident #2 is prescribed [REDACTED] – Apply to affected area every 12 hours- Apply to affected area on 12 hours remove in 12 hours. However, the resident's May 2022 MAR indicates that the patch was administered to the resident at both the morning medication pass and the bedtime medication pass from 5/1/22 through 5/9/22.

Plan of Correction**Accept**

All medication administration staff were educated immediately to be aware of this medication situation by me, [REDACTED], on 5-10-22 and 5-11-22. I will continue to monitor and educate. The medication was being administered correctly but the confusion was due to the new EMAR system. I will continue to monitor to ensure the documentation is being done properly by continuing to check the EMAR on a weekly basis.

I, [REDACTED], spoke with the Med Techs regarding the correct way to record the medication administration in the system on 5-10 and 5-11-22. All were made aware to ensure they were recording properly. The medication itself was being administered properly. I will continue to monitor the EMAR to ensure it is being recorded correctly.

The correction has been made in the EMAR system to indicate the application of the patch in the AM and the removal of the patch in the PM. I have included the updated MAR to show the correction.

[REDACTED] LPN, corrected the order in the EMAR on 5-11-22.

Completion Date: 05/11/2022

Document Submission**Implemented**

All medication administration staff were educated immediately to be aware of this medication situation by me, [REDACTED], on 5-10-22 and 5-11-22. I will continue to monitor and educate. The medication was being administered correctly but the confusion was due to the new EMAR system. I will continue to monitor to ensure the documentation is being done properly by continuing to check the EMAR on a weekly basis.

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

I, [REDACTED], spoke with the Med Techs regarding the correct way to record the medication administration in the system on 5-10 and 5-11-22. All were made aware to ensure they were recording properly. The medication itself was being administered properly. I will continue to monitor the EMAR to ensure it is being recorded correctly.

The correction has been made in the EMAR system to indicate the application of the patch in the AM and the removal of the patch in the PM. I have included the updated MAR to show the correction.

Vickie Trott, LPN, corrected the order in the EMAR on 5-11-22.