



Emailing date: July 11, 2023

[REDACTED]
Fawn Care, LLC
282 Shawnderosa Drive
Tarentum, PA 15084

RE: Fawn Care
282 Shawnderosa Drive
Tarentum, PA 15084
License #: 454050

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on April 10, 2023 and June 15, 2023, we have found the above facility to be in compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala". The signature is written in a cursive, flowing style.

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

Facility Information

Name: *FAWN CARE* License #: *45405* License Expiration: *06/14/2023*
Address: *282 SHAWNDEROSA DRIVE, TARENTUM, PA 15084*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *FAWN CARE LLC*
Address: *282 SHAWNDEROSA DRIVE, TARENTUM, PA, 15084*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *18* Waking Staff: *14*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *06/15/2023*

Inspection Dates and Department Representative

06/15/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *16* Residents Served: *15*

Secured Dementia Care Unit

In Home: <i>No</i>	Area:	Capacity:	Residents Served:
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Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: <i>3</i>	Are 60 Years of Age or Older: <i>13</i>
Diagnosed with Mental Illness: <i>4</i>	Diagnosed with Intellectual Disability: <i>1</i>
Have Mobility Need: <i>3</i>	Have Physical Disability: <i>0</i>

Inspections / Reviews

06/15/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/25/2023*

Inspections / Reviews (*continued*)

06/26/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 07/05/2023
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/30/2023

06/30/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 07/05/2023
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 07/05/2023

07/06/2023 - Document Submission

Submitted By: [REDACTED] Date Submitted: 07/05/2023
Reviewer: [REDACTED] Follow-Up Type: Exception

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

Resident #1's 10ml vial of Novolin N was open and undated in the refrigerator. According to the manufacturer's instructions, this medication must be discarded after 42 days of opening. Additionally, the open vial of Novolin N was stored in the refrigerator; however, the manufacturer's instructions indicate to store open vials at room temperature.

Plan of Correction

Directed [REDACTED] - 06/30/2023)

The medication was immediately discarded. The pharmacy sent a new bottle with proper labeling. The new bottle was sent on 6/16/2023. Staff were provided additional training on 6/19/2023 by Medi Home Health. The staff training consisted of proper medication usage, handling, and storage, along with the five (5) rights. Also, proper procedure for any type of questions and concerns relating to medications will be directed to [REDACTED]

[REDACTED] All documentation of education will be kept in a staff training binder. [REDACTED] will complete random audits of the med carts on a weekly basis. (DIRECTED: The weekly audits shall begin on 7/5/23 and shall include a review of all medication storage areas weekly to ensure prescription medications, OTC medications and CAM are stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions, which includes proper insulin storage.

[REDACTED] 6/30/23).

Directed Completion Date: 07/05/2023

Implemented [REDACTED] - 07/06/2023)

184a - Resident's Meds Labeled

2. Requirements

2600.

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

1. The resident's name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

No pharmacy label was present on resident #2's box Megestrol Acetaminophen 400mg/10ml, which contained 10 doses.

Plan of Correction

Directed [REDACTED] - 06/30/2023)

I am assuming this is referring to megestrol acetate as there is no such drug as megestrol acetaminophen. All medicines coming from the pharmacy will be inspected to make sure labels are on the individual containers. The pharmacy sent a new bottle with proper labeling. Staff were provided additional training on 6/19/2023 by Medi Home Health. The proper label was sent on 6/16/2023. The staff training consisted of proper medication usage, handling, and storage, along with the five (5) rights. Also, proper procedure for any type of questions and concerns

184a - Resident's Meds Labeled (continued)

relating to medications will be directed to [REDACTED]. All documentation of education will be kept in a staff training binder. [REDACTED] will complete random audits of the med carts on a weekly basis. (DIRECTED: The weekly audits shall begin on 7/5/23 and shall include a weekly medication review of at least 4 residents to ensure accurate and complete pharmacy labels are present on resident medications in accordance with prescribers' orders. [REDACTED] 6/30/23).

Directed Completion Date: 07/05/2023

Implemented [REDACTED] - 07/06/2023)