

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

April 22, 2024

[REDACTED]
SYDLYNN INC
[REDACTED]

RE: PARADISE MANOR
206 EAST LINCOLN AVENUE
HATFIELD, PA, 19440
LICENSE/COC#: 14446

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/18/2024 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

Facility Information

Name: *PARADISE MANOR* License #: *14446* License Expiration: *06/26/2024*
 Address: *206 EAST LINCOLN AVENUE, HATFIELD, PA 19440*
 County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *SYDLYNN INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: *21* Waking Staff: *16*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Fine* Exit Conference Date: *01/19/2024*

Inspection Dates and Department Representative

01/18/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *37* Residents Served: *21*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *18*
 Diagnosed with Mental Illness: *9* Diagnosed with Intellectual Disability: *2*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

01/18/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/02/2024*

02/05/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *02/26/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *02/26/2024*

Inspections / Reviews *(continued)*

04/22/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/26/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

182b - Prescription Medication

1. Requirements

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- 1. A physician, licensed dentist, licensed physician’s assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.

Description of Violation

Staff Person A administered medications to residents to include the following; Trulicity to residents [redacted] and [redacted] on 1/5/24 and 1/12/24. Staff person A is not a physician, licensed dentist, licensed physician’s assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.

Plan of Correction

Accept [redacted] - 02/05/2024)

The [redacted] is sending in a waiver request to administer the medication.

Immediate: (1/22/24) [redacted] to apply for waiver. Residents will self-administer the medication in the meantime as they are very able to do so.

Training: (1/22/24) [redacted] trained med techs to make sure all prescription medications are administered by a licensed professional if not self-administered by the resident.

How trained: Inservice by [redacted]

Responsible Staff: Resident Care Coordinator/Med Techs

On-going: (1/31/24) Resident Care Coordinator will audit mars weekly to ensure compliance using a checklist.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [redacted] - 04/15/2024)

183d - Prescription Current

2. 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 [redacted], [redacted] prescribed for resident [redacted], was in the home's medication cart; however, the medication was discontinued on [redacted]

Plan of Correction

Accept [redacted] - 02/05/2024)

Immediate: (1/22/24) Med Techs were immediately told by [redacted] not to leave discontinued medications in the home. All discontinued medications were removed from the home.

Training: (1/22/24) Med Techs were trained by administrator not to leave discontinued medications in the home.

How trained: Inservice by [redacted]

Responsible Staff: Med Techs

On-going: (1/31/24) [redacted] will do random med cart checks weekly using a checklist to ensure staff is complying with the regulation.

Licensee's Proposed Overall Completion Date: 02/02/2024

183d - Prescription Current (continued)

Implemented [redacted] - 04/15/2024)

183e - Storing Medications

3. 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 [redacted] [redacted] for resident 3, was opened and not dated. According to the manufacturer's instructions the inhaler must be thrown away 13 months after opening the foil pouch, when the dose counter reaches "0", or after the expiration date, whichever comes first.

On [redacted], a medication pack prescribed to resident 4 containing [redacted], [redacted], [redacted] and [redacted] was not sealed and the pills fell out of the pack when it was picked up.

On [redacted] [redacted] for resident 5, was opened and not dated. According to the manufacturer's instructions the inhaler must be thrown away 13 months after opening the foil pouch, when the dose counter reaches "0", or after the expiration date, whichever comes first.

Repeat Violation: 4/29/22

Plan of Correction

Accept [redacted] - 02/05/2024)

Immediate: (8/17/23) Med Techs were immediately told by [redacted] to use medications in accordance with manufacturer's instructions and opened inhalers were dated.

Training: (8/28/23) Med Techs were trained by [redacted] to discard medications in accordance with manufacturer's instructions.

How trained: Inservice by [redacted]

Responsible Staff: Med Techs

On-going: (1/31/24) [redacted] will do random spot checks of carts to make sure expired meds are discarded and opened inhalers are dated. This will be done on various shifts to make sure the staff is complying with the regulations.

Checks will be done weekly using a checklist.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [redacted] - 04/15/2024)

185a - Implement Storage Procedures

4. 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

On [redacted], a blister pack of [redacted] prescribed to resident [redacted] with 28 pills did not have a completed controlled substance count sheet.

185a - Implement Storage Procedures (continued)

On [redacted] a blister pack of [redacted] prescribed to resident [redacted] with 30 pills did not have a completed controlled substance count sheet.

On [redacted] a bottle of [redacted] prescribed to resident [redacted] with 90 pills did not have a completed controlled substance count sheet.

Plan of Correction

Accept [redacted] 02/05/2024)

Immediate: (1/22/24) Med Techs were immediately told by [redacted] to make sure all controlled substances have a completed controlled substance count sheet.

Training: (1/22/24) Med Techs were trained by [redacted] to make sure all controlled substances have a completed controlled substance count sheet.

How trained: Inservice by [redacted]

Responsible Staff: Med Techs

On-going: (1/31/24) [redacted] will make sure all controlled substances have a completed controlled substance count sheet, checks will be done weekly using a checklist.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [redacted] - 04/15/2024)

187a - Medication Record

5. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident [redacted] medication administration record does not contain a diagnosis or purpose for the following PRN medications: [redacted], [redacted], [redacted], [redacted]

Resident [redacted] is prescribed [redacted] [redacted] three times daily. If [redacted]. The resident's medication administration record does not include the number of units for each administration.

Plan of Correction

Accept [redacted] 02/05/2024)

Diagnosis was added to the record and the medication record is now being recorded properly.

Immediate: (1/22/24) Med Techs were immediately told by RCC to make sure medication record contains for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special precautions, if applicable. (12) Diagnosis or purpose for

187a - Medication Record (continued)

the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.

Training: (1/22/24) Med Techs were trained by [redacted] to make sure medication record contains for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.

How trained: Inservice by [redacted]

Responsible Staff: Med Techs

On-Going: (1/31/24) [redacted] will do weekly checks of the MAR's to make sure medication record contains for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication. RCC will use a checklist for the audit.

Update: (1/22/24) [redacted] reached out to a qualified med trainer to do a training. As of the date of submission we are still waiting for a response to confirm a date for training.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [redacted] 04/15/2024)

187d - Follow Prescriber's Orders

6. Requirements

2600.

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

Description of Violation

Resident [redacted] is prescribed [redacted] four times daily. However, resident [redacted] is being administered [redacted] four times daily. Staff person A could not recall the last time Ipratropium/ Sol Albuter was present in the home.

Resident [redacted] is ordered to have vitals taken at 8:00 am for 1 week beginning 1/12/24. The resident did not have vitals taken on 1/18/24.

Plan of Correction

Accept [redacted] - 02/05/2024)

Standard order was discontinued by physician for inhaler.

Immediate: (1/18/24) [redacted] verbally spoke with all med techs regarding following directions of the prescriber and paying close attention to all medications prescribed to be in the home.

Training: (1/22/24) Med techs were trained to follow directions of the prescriber and pay close attention that all prescribed medications are in the home.

How trained: Inservice by [redacted]

Responsible Staff: Med Techs

187d - Follow Prescriber's Orders (continued)

On-Going: (1/31/24) [REDACTED] will audit the resident charts weekly to ensure proper documentation and to ensure staff is following the directions of the prescribing physicians to prevent recurrence using a checklist.
Update: (1/22/24) [REDACTED] reached out to a qualified med trainer to do a training. As of the date of submission we are still waiting for a response to confirm a date for training.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [REDACTED] - 04/15/2024)

188b - Medication Error Reporting

7. Requirements

2600.

188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] 1 vial four times daily. However, resident [REDACTED] is being administered [REDACTED] four times daily. It is unclear how long [REDACTED] has not been available and this medication error has not been reported to the resident, the resident's designated person and the prescriber.

Plan of Correction

Accepted [REDACTED] 02/05/2024)

Resident [REDACTED] medication was DC'd on 1/24/24.

Immediate: (1/28/24) Administrator spoke with the [REDACTED] regarding the immediate reporting of med errors to the resident, resident's designated person, and to the prescriber.

Training: (1/22/24) Administrator trained the [REDACTED] regarding the immediate reporting of med errors to the resident, resident's designated person, and to the prescriber.

How trained: Inservice by Administrator

Responsible Staff: [REDACTED]

On-Going: (1/31/24) [REDACTED] will audit the resident charts/MARs weekly to ensure proper documentation and to ensure staff is following the directions of the prescribing physicians to prevent recurrence using a checklist.

Update: (1/22/24) [REDACTED] reached out to a qualified med trainer to do a training. As of the date of submission we are still waiting for a response to confirm a date for training.

Licensee's Proposed Overall Completion Date: 02/02/2024

Implemented [REDACTED] - 04/15/2024)