

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

July 1, 2024

[REDACTED]
PENNSYLVANIA SOLDIERS AND SAILORS HOME

[REDACTED]
P.O. BOX 6239
[REDACTED]

RE: PENNSYLVANIA SOLDIERS AND
SAILORS HOME
560 E. 3RD STREET
ERIE, PA, 16512
LICENSE/COC#: 44829

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/11/2024 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: PENNSYLVANIA SOLDIERS AND SAILORS HOME License #: 44829 License Expiration: 02/19/2025
Address: 560 E. 3RD STREET, ERIE, PA 16512
County: ERIE Region: WESTERN

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: PENNSYLVANIA SOLDIERS AND SAILORS HOME
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 43 Waking Staff: 32

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Monitoring Exit Conference Date: 04/11/2024

Inspection Dates and Department Representative

04/11/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100 Residents Served: 43

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: 40
Diagnosed with Mental Illness: 42 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

04/11/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 05/02/2024

04/30/2024 - POC Submission

Submitted By: [Redacted] Date Submitted: 06/05/2024
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 06/04/2024

Inspections / Reviews *(continued)*

07/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/05/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85a - Sanitary Conditions

1. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

Resident [redacted] glucometer was used to check resident [redacted] of [redacted] or [redacted] at 3:24 p.m..

Plan of Correction

Accept [redacted] - 04/30/2024)

1. Nursing will confirm Resident [redacted] and Resident [redacted] have individual glucometers. Nursing Administration/ or designee by May 15th, 2024
2. Resident [redacted] was monitored with no adverse reaction. Nursing Administration/or designee, April 12, 2024.
3. PRN orders will be reviewed to ensure they are present for all residents with glucometer use. Nursing Administration/or designee by May 15th, 2024
4. All residents with glucometer use will be confirmed to have individual devices by the Nursing Administration/or designee. Nursing Administration by May 15th, 2024.
5. Nursing Staff that includes RN, LPNs, Nursing Supervisors, Nursing Administration, QA, CRNP, Medical Director, PCU Administrator and Commandant will be educated and trained on the availability of individual glucometers and proper use which includes the storage in the newly purchased and to be installed glucometer storage rack for all the labeled individual devices along with return demonstration of the process. Designated return demonstration auditors along with the Nurse Educator by May 29th, 2024.
6. Audits will be conducted daily times 4 weeks by the Nursing Supervisors to determine if the individual glucometer is available and used. Nursing Supervisors are conducting the audits. The date of completion of the four weeks of auditing will be May 29, 2024.
7. Findings will be addressed and submitted to QA for further review and interventions as needed on May 30th, 2024.

Licensee's Proposed Overall Completion Date: 06/05/2024

Implemented [redacted] - 07/01/2024)

185a - Implement Storage Procedures

2. 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 [redacted] April 2024 medication administration record (MAR) indicated a [redacted] reading of [redacted] on [redacted] at 6:00 a.m.. However, the resident's glucometer indicated a [redacted] of [redacted] or [redacted] at 5:57 a.m.

Plan of Correction

Accept [redacted] - 04/30/2024)

1. Resident [redacted] transcription entry from April 3, 2024, was corrected in the MAR according to the glucometer device reading by nursing. The Nursing Administration confirmed the correction.
2. The transcriptions for all residents with orders for glucometer use will be reviewed for accuracy between 04.01.2024 – 04.30.2024 by Nursing Administration/ or designee by May 15th, 2024.
3. Nursing Staff that includes RN, LPNs, Nursing Supervisors, Nursing Administration, QA, CRNP, Medical Director, PCU Administrator and Commandant will be educated and trained on the individual glucometers and proper use

185a - Implement Storage Procedures (continued)

which includes transcribing into the medication administration record (MAR) the [REDACTED] reading indicated on the device accurately by Nurse Educator by May 29th, 2024

4. Audits will be conducted daily time 4 weeks by the Nursing Supervisors to determine if the individual glucometer reading is correctly recorded in the medical record. Findings will be addresses and submitted to QA for further review and interventions as needed. The date of completion of the four weeks of auditing will be May 29, 2024.

5. Findings will be addressed and submitted to QA for further review and interventions as needed on May 30th, 2024.

Licensee's Proposed Overall Completion Date: 06/05/2024

Implemented [REDACTED] 07/01/2024)