



September 04, 2014

Cathy Shappell, Director
Elwyn Miller Hall
111 Elwyn Road
Elwyn, PA 19063

RE: Elwyn Miller Hall
License # 300830 - Regular

Dear Ms. Shappell:

As a result of the Department of Aging's licensing inspection of the above named facility on 07/23/2014, three areas of non-compliance were identified. The legal entity submitted an acceptable written plan to correct each area of non-compliance. Therefore, the Department issued a Regular License, indicating compliance with applicable statutes, ordinances and regulations.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker".

Kevin Longenecker
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

LICENSE

This license is hereby granted to ELWYN, INC.
LEGAL ENTITY

To operate ELWYN MILLER HALL
(NAME OF CENTER)

Located at 111 ELWYN ROAD ELWYN, PA 19063
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 96
(MAXIMUM CAPACITY)

Restrictions: _____

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from October 01, 2014 until September 30, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 300830 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: September 04, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER: 300830	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/23/2014
NAME OF PROVIDER OR SUPPLIER Elwyn Miller Hall		STREET ADDRESS, CITY, STATE, ZIP CODE 111 ELWYN ROAD ELWYN, PA 19063		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	Initial Comments A State licensure visit was completed on 7/23/2014 and it was determined that Elwyn Miller Hall was not in compliance with the following requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers regulations:	1 000	11.102(c) Client physical examination and med report Client #1 was placed on program leave on 07-24-14 due to lack of current PPD. Client #1 returned to day program on 7-28-14 with copy of PPD results.	
11610	11.102(c) Client physical examination and med report The medical report shall include: (1) A review of previous health history, current medication regimen, use of medical treatments and therapies; current health problems and conditions; and a schedule for client self-administration of medications. (2) The record of a general physical examination. (3) General sensory functioning; sensory aids. (4) An indication that a tuberculin skin test has been administered with negative results within 2 years; or, if tuberculin skin test is positive, the results of a chest X-ray. (5) To the extent that confidentiality laws permit, written authorization in the form of a signed statement that the client is free of communicable disease, or that the client has a communicable disease but is able to be in the center if specific precautions are taken which will prevent the spread of the disease to other individuals. (6) Medical information pertinent to diagnosis and	11610	The Program policy and procedure for Client Physical Examination and Medical Report was revised to include PPD results. The Miller Program Manager/RN is responsible to re-train the program Management Team in the implementation of the Client Physical Examination and Medical Report policy and procedure. (8-4-14) Please see attached Policy, training signature sheet and client #1 current PPD results.	

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

Catherine G. Shuppell

TITLE

Director - ADSS

(X6) DATE

DEPARTMENT OF AGING APPROVAL

Kenn [Signature]

Chief, Division of Licensing

DATE

8/29/14

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER LICENSE NUMBER: 300830	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/23/2014	
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11610	Continued From page 1 treatment in case of an emergency. This STANDARD is not met as evidenced by: Findings: Based on a review of seven of seventy-one client medical records, it was discovered that the center failed to ensure the completion of the tuberculin skin test requirement as specified in subsection (c)(4) for one client. The tuberculin skin test was not administered within 2 years from the last tuberculin test for client #1. The most recent tuberculin test was completed on 3/13/2012.	11610	<p>11.132(a) Staff physical examination</p> <p>Elwyn requires that each employee have a physical examination every two years . Elwyn also requires that when an employee transfers between departments that they meet this requirement .</p> <p>The Program Manager/RN is responsible to review all internal applicants for transfer requirements including current physical examination and tuberculin test results. Program Manager /RN was trained on 8-5-14.</p> <p>Please see attached Corporate Elwyn Transfer Policy # 503 and Employee Physical Examination Policy # 307.</p>	
11900	<p>11.132(a) Staff physical examination</p> <p>Staff persons who come into direct contact with clients or who prepare or serve food shall have a physical examination within 12 months prior to employment, and every 2 years from the date of the last physical examination thereafter.</p> <p>This STANDARD is not met as evidenced by:</p> <p>Findings: Based on a review of staff medical records, it was determined that one staff person did not receive a physical examinations prior to hire. The start date of staff person #1 was 3/25/2014; the physical examination was conducted on 4/30/2014.</p>	11900		

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12380	<p>11.191(b) Emergency information</p> <p>Emergency information for a client shall include the following:</p> <p>(1) A written agreement with the client or responsible party regarding emergency care and ambulance transportation, when the agreement is not included as an element in the enrollment agreement in §11.103 (relating to enrollment agreement).</p> <p>(2) The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.</p> <p>(3) The name, address and telephone number of the client's physician or source of health care and hospital preference.</p> <p>(4) The name, address and telephone number of the person able to give consent for emergency medical treatment, if applicable.</p> <p>(5) A copy of the client's most recent annual physical examination, which shall include information on current diagnosis, medications and allergies.</p> <p>This STANDARD is not met as evidenced by:</p> <p>REPEAT CITATION</p> <p>Findings: Based on a review of the centers portable emergency file and a discussion with the centers Director, it was determined that the center failed to include the most recent copy of the annual physical examination for one client.</p> <p>The physical examination form for Client #2 was</p>	12380	<p>11.191(b) Emergency Information</p> <p>The Miller Program Specialist placed the current physical dated 10-30-13 for Client #2 in the Emergency Binder on 7-23-14.</p> <p>The Emergency Binder will be reviewed by the Program Secretary and assigned Program Specialist for any additional expired physicals monthly after each fire drill. Documentation of current physical dates, due dates and review signatures will be placed in the Emergency Information Binder.</p> <p>The Miller Program Manager/ RN is responsible to re-train the program Management Team in the implementation of the "Emergency Information Binder Policy". (8-5-14)</p> <p>Please see attached Policy, training signature sheet and client #2 current physical examination.</p>	

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12380	Continued From page 3 dated 10/31/12.	12380		