

Department of Human Services
Bureau of Human Service Licensing

December 2, 2021

[REDACTED]
JEWISH HOME AND HOSPITAL FOR AGED AT PITTSBURGH
200 JHF DRIVE
PITTSBURGH, PA 15217

RE: AHAVA MEMORY CARE RESIDENCE
200 JHF DRIVE
PITTSBURGH, PA, 15217
LICENSE/COC#: 44858

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 10/20/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
Larry Mazza

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: *AHAVA MEMORY CARE RESIDENCE* License #: *44858* License Expiration Date: *10/11/2022*
Address: *200 JHF DRIVE, PITTSBURGH, PA 15217*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *4125218299* Email: [REDACTED]

Legal Entity

Name: *JEWISH HOME AND HOSPITAL FOR AGED AT PITTSBURGH*
Address: *200 JHF DRIVE, PITTSBURGH, PA, 15217*
Phone: *4125218299* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *1-2* Date: *03/09/2018* Issued By: *City of Pittsburgh*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *58* Waking Staff: *44*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *10/20/2021*

Inspection Dates and Department Representative

10/20/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *30* Residents Served: *29*

Special Care Unit

In Home: *Yes* Area: *Entire Residence* Capacity: *30* Residents Served: *29*

Hospice

Current Residents: *6*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *29*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *29* Have Physical Disability: *0*

Inspections / Reviews

10/20/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/19/2021*

Inspections / Reviews *(continued)*

11/30/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *12/01/2021*

12/2/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *12/12/2021*

184a Labeling

1. Requirements

2800.

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

Description of Violation

Resident #1 is prescribed Humalog 100 u/ml-Inject 6 units subcutaneously at breakfast plus sliding scale. If glucose is less than 100 mg/dl, give 5 units. Inject 4 units subcutaneously at lunch plus sliding scale. If glucose is less than 100 mg/dl, give 3 units. Inject 3 units subcutaneously at dinner plus sliding scale. If glucose is less than 100 mg/dl, give 2 units. Before each meal, check blood glucose 3 times a day and inject subcutaneously per sliding scale: 100-140=0 units; 141-180=1 unit; 181-220=2 units; 221-260=3 units; 261-300=4 units; 301-340=5 units; 341-499=6 units; >500, give 7 units and recheck in 2 hours. If still >500, give 7 units and recheck in 1 hour. If still >500, call MD. Check blood glucose twice a day at 9:00 pm and 3:00 am and administer subcutaneously in accordance with sliding scale. If glucose is >500, give 3 units subcutaneously plus sliding scale coverage and recheck in 2 hours. If still >500, do not repeat treatment and call doctor. However, the pharmacy label indicates, Humalog KwikPen 100 units/ml-inject subcutaneous before meals per sliding scale: <70 or >500, notify MD. 141-180=1 unit; 181-220=2 units; 221-260=3 units; 261-300=4 units; 301-340=5 units; 341-499=6 units; if >500, give 7 units and recheck in two hours. If still >500, give another 7 units and check in one hour. If still >500 notify MD.

Resident #3 is prescribed Toujeo Max 300 units/ml-Inject 16 units subcutaneously 2 times daily in the AM and PM; however, the pharmacy label indicates Toujeo Max 300 units/ml-Inject 32 units subcutaneously once daily at bedtime.

Plan of Correction**Accept**

Direction change stickers have been placed on the insulin pens that are in the refrigerator as well as in the med cart for Residents 1 and 3; please see attached pictures of pens in the med cart as well as in the refrigerator.

All AHAVA staff responsible for passing medication will be in-serviced regarding the need to have the correct label (or direction change stickers) on insulin pens being stored in the refrigerator. All AHAVA staff responsible for passing medications will also be in-serviced regarding the requirement for insulin pens stored in the med carts to be labeled with the resident's name as well as the open date of the pen. All AHAVA staff responsible for administering medication will also be in-serviced regarding the need to double check all medication deliveries against the corresponding medication orders. The in-service will be conducted by the Administrator/designee no later than December 6, 2021. Documentation of the in-service will be kept.

Redlining of any new medication orders will be completed weekly starting the week of November 29, 2021. Redlining will be completed by the Director of Resident Care of Designee. Documentation of the redlining will be kept.

An audit of all insulin orders vs MAR vs pens was completed by the Director of Resident Care on November 28, 2021. Additional monthly audits of insulin orders to pens will be conducted by the Director of Resident Care or designee beginning the month of December. Documentation of the audits will be kept.

Completion Date: 12/07/2021

185a Storage procedures

1. Requirements

2800.

185.a. The residence 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 10/1/21 at 7:53 pm, resident #1's blood glucose was 273; however, the resident's blood glucose was documented on the resident's October 2021 medication administration record (MAR) as 293.

On 10/2/21 at 8:17 pm, resident #1's blood glucose was 221; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 227.

On 10/10/21 at 3:57 pm, 3:58 pm, 5:43 pm and 6:25 pm, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 499 for the morning, afternoon, and evening readings.

On 10/10/21 at 9:54 pm, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500.

On 10/11/21 at 2:55 am, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500.

On 10/11/21 at 7:33 am and 11:24 am, resident #1's glucometer indicated the resident's blood sugar was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500 for the morning and afternoon readings.

On 10/10/21 at 4:40 pm, resident #2's blood glucose was 249; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 118.

185a Storage procedures *(continued)***Plan of Correction****Directed**

Beginning the week of December 6, 2021, Glucometer/MAR audits for all residents who are prescribed insulin/blood sugar checks will be increased to four times per week until 100% compliance is met. After 100% compliance is met, audits will be conducted weekly for 1 month, then monthly for 6 months.. Audits will be conducted by Director of Resident Care or designee. Audits will be reviewed weekly by the Administrator or designee. Immediate education by the Administrator, Director of Resident Care or designee for staff who are responsible for errors will be conducted when necessary. Documentation of education and audits will be kept. (DIRECTED: The audits shall include ensuring all resident blood sugars are completed in accordance with prescribers' orders, using the resident's own glucometer, The audits shall also include a review of all blood sugar readings documented on resident administration records to ensure accurate documentation and to ensure procedures are followed when a glucometer provides a reading such as "HI", in accordance with manufacturer's instructions and prescribers' orders. LM 12/2/21).

Staff who administer insulin were educated on October 11, 2021, regarding the meaning of 'hi' on the glucometers and that the reading is greater than 600 not 500. Please see attached.

All AHAVA staff who administer insulin will attend diabetic education on December 9, 2021. The education will be provided by a certified diabetic educator. The education will include training specific to resident #1's insulin orders as well as the standard diabetic training related to insulin administration, signs and symptoms of hyper/hypo glycemia and glucometer usage. Documentation of the staff training will be kept. (DIRECTED: The training shall also include education on manufacturer's instructions for all resident glucometers when readings do not provide a numerical blood sugar reading, such as a blood sugar reading of "HI", to ensure prescribers' orders are followed. LM 12/2/21)

Completion Date: 12/09/2021

187a Medication record

1. Requirements

2800.

187.a. A medication record shall be kept to include the following 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.

187a Medication record (continued)

Description of Violation

Resident #1 is prescribed Humalog 100 u/ml-Inject 6 units subcutaneously at breakfast plus sliding scale. If glucose is less than 100 mg/dl, give 5 units. Inject 4 units subcutaneously at lunch plus sliding scale. If glucose is less than 100 mg/dl, give 3 units. Inject 3 units subcutaneously at dinner plus sliding scale. If glucose is less than 100 mg/dl, give 2 units. Before each meal, check blood glucose 3 times a day and inject subcutaneously per sliding scale: 100-140=0 units; 141-180=1 unit; 181-220=2 units; 221-260=3 units; 261-300=4 units; 301-340=5 units; 341-499=6 units; >500, give 7 units and recheck in 2 hours. If still >500, give 7 units and recheck in 1 hour. If still >500, call MD. Check blood glucose twice a day at 9:00 pm and 3:00 am and administer subcutaneously in accordance with sliding scale. If glucose is >500, give 3 units subcutaneously plus sliding scale coverage and recheck in 2 hours. If still >500, do not repeat treatment and call doctor. However, the resident's October 2021 MAR does not include the additional insulin that is to be administered if the resident's blood glucose is less than 100 mg/dl at breakfast, lunch and dinner.

Plan of Correction**Directed**

Facility received new Humalog orders for resident #1 from Resident's PCP on 11.29.2021. Please see attached orders. Orders were changed to: discontinue afternoon insulin and begin 6 units with existing Humalog sliding scale order. Discontinue current dinner order and begin 4 units Humalog with existing Humalog sliding scale order. Discontinue 3AM CBG, continue 9PMCBG with no coverage; if CBG greater than 500 give 7units of insulin and recheck in two hours. If still greater than 500 give another 7 units of insulin and recheck in one hour; If over 500 notify MD.

Resident #1's MAR was updated to reflect the above order. Please see attached.

All orders for residents receiving insulin were audited for accuracy by the Director of Resident Care on 11.28.2021

Additional audits of all MARS for residents who receive insulin will be audited monthly, beginning the month of December to ensure physician orders match the orders on the residents' MARs. Audits will be conducted by the Director of Resident Care or designee. Documentation of the audits will be kept

DIRECTED: Within 10 calendar days of receipt of the plan of correction: All staff persons qualified to administer medications shall be reeducated on the home's procedures for updating resident medication administration records immediately upon receipt of new medication orders. Documentation of the education shall be kept. LM 12/2/21

Completion Date: 11/29/2021

187d Follow prescriber's orders

1. Requirements

2800.

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

187d Follow prescriber's orders (continued)

Description of Violation

Resident #1 is prescribed Humalog 100 u/ml-Inject 6 units subcutaneously at breakfast plus sliding scale. If glucose is less than 100 mg/dl, give 5 units. Inject 4 units subcutaneously at lunch plus sliding scale. If glucose is less than 100 mg/dl, give 3 units. Inject 3 units subcutaneously at dinner plus sliding scale. If glucose is less than 100 mg/dl, give 2 units. Before each meal, check blood glucose 3 times a day and inject subcutaneously per sliding scale: 100-140=0 units; 141-180=1 unit; 181-220=2 units; 221-260=3 units; 261-300=4 units; 301-340=5 units; 341-499=6 units; >500, give 7 units and recheck in 2 hours. If still >500, give 7 units and recheck in 1 hour. If still >500, call MD. Check blood glucose twice a day at 9:00 pm and 3:00 am and administer subcutaneously in accordance with sliding scale. If glucose is >500, give 3 units subcutaneously plus sliding scale coverage and recheck in 2 hours. If still >500, do not repeat treatment and call doctor.

On 10/10/21 at 3:57 pm, 3:58 pm, 5:43 pm and 6:25 pm, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 499 for the morning, afternoon, and evening readings and 6 units of insulin were administered to the resident all 3 times. Also, according to the manufacturer's instructions for resident #1's Contour glucometer, a reading of "HI" indicates the resident's blood glucose is above 600 mg/dl.

On 10/10/21 at 9:54 pm, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500 and 6 units of insulin were administered to the resident. Also, according to the manufacturer's instructions for resident #1's Contour glucometer, a reading of "HI" indicates the resident's blood glucose is above 600 mg/dl.

On 10/11/21 at 2:55 am, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500 and 5 units of insulin were administered to the resident. Also, according to the manufacturer's instructions for resident #1's Contour glucometer, a reading of "HI" indicates the resident's blood glucose is above 600 mg/dl.

On 10/11/21 at 7:33 am and 11:24 am, resident #1's glucometer indicated the resident's blood glucose was "HI"; however, the resident's blood glucose was documented on the resident's October 2021 MAR as 500 for the morning and afternoon readings and 7 units of insulin were administered to the resident both times. Also, according to the manufacturer's instructions for resident #1's Contour glucometer, a reading of "HI" indicates the resident's blood glucose is above 600 mg/dl.

Resident #1 was administered the incorrect amount of insulin on numerous occasions, to include the following:

Date/Time	Blood Glucose Reading	Amount of Insulin Administered	Prescribed amount
Insulin			
• 10/3/21 @ 9:00 pm	315	0	5
• 10/7/21 @3:00 am	453	0	6
• 10/10/21 @ 3:00 am	476	0	6
• 10/16/21 @ 9:00 pm	378	0	6

Resident #2 is prescribed Humalog Kwik Pen 100 units/ml-Inject subcutaneously 3 times daily per sliding scale: 151-200=1 unit; 201-250=2 units; 251-300=3 units; 301-350=4 units; 351-400=5 units; >400 notify MD. However, the resident's blood glucose was only checked twice on 10/6/21.

Resident #2 is prescribed Humalog Kwik Pen 100 units/ml-Inject subcutaneously 3 times daily per sliding scale: 151-200=1 unit; 201-250=2 units; 251-300=3 units; 301-350=4 units; 351-400=5 units; >400 notify MD. On 10/10/21 at 4:40 pm, the resident's blood glucose reading was 249; however, the resident's October 2021 MAR indicates a blood glucose reading of 118 and that no insulin was administered. According to the prescribed sliding scale, 2 units of insulin should have been administered to the resident. Also, the resident's October 2021 MAR indicates a blood glucose reading of 118 for the evening blood glucose check; however, the only blood glucose reading on the resident's glucometer for 10/10/21 was completed at 4:40 pm.

Resident #2 is prescribed Humalog Kwik Pen 100 units/ml-Inject subcutaneously 3 times daily per sliding scale: 151-200=1 unit; 201-250=2 units; 251-300=3 units; 301-350=4 units; 351-400=5 units; >400 notify MD. According to the resident's October 2021 MAR, the resident's morning blood glucose reading was 209 and 2 units of insulin were administered on 10/4/21; however, there is no blood glucose reading on the resident's glucometer for the morning of 10/4/21.

Resident #2 is prescribed Humalog Kwik Pen 100 units/ml-Inject subcutaneously 3 times daily per sliding scale: 151-200=1 unit; 201-250=2 units; 251-300=3 units; 301-350=4 units; 351-400=5 units; >400 notify MD. According to the resident's October 2021 MAR, the resident's evening blood glucose reading was 155 and 1 unit of insulin was administered on 10/5/21; however, there is no blood glucose reading on the resident's glucometer for the evening of 10/5/21.

Resident #3 is prescribed blood glucose monitoring 2 times a day. According to the resident's October 2021 MAR, the resident's blood glucose was 466 for both blood glucose readings on 10/10/21; however, there are no blood glucose readings on the resident's glucometer for 10/10/21.

187d Follow prescriber's orders (*continued*)**Plan of Correction****Directed**

Beginning the week of December 6, 2021, Glucometer/MAR audits will be increased to four times per week until 100% compliance is met. For the week of 11.29.2021, 3 audits will be completed. Audits will also include monitoring the amount of insulin administered vs the related physician's order. After 100% compliance is met, audits will be conducted weekly for 1 month, then monthly for 6 months.. Audits will be conducted by Director of Resident Care or designee. Immediate education will be conducted when necessary. (DIRECTED: The audits shall include ensuring all resident blood sugars are completed in accordance with prescribers' orders, using the resident's own glucometer, The audits shall also include a review of all blood sugar readings documented on resident administration records to ensure accurate documentation and to ensure procedures are followed when a glucometer provides a reading such as "HI", in accordance with manufacturer's instructions and prescribers' orders. LM 12/2/21).

Staff who administer insulin were educated, regarding the meaning of 'hi' on the glucometers and that the reading is greater than 600 not 500. Please see attached.

All AHAVA staff who administer insulin will attend diabetic education on December 9, 2021. The education will be provided by a certified diabetic educator and will include proper glucometer usage/reading and sliding scale insulin administration. (DIRECTED: The training shall also include education on manufacturer's instructions for all resident glucometers when readings do not provide a numerical blood sugar reading, such as a blood sugar reading of "HI", to ensure prescribers' orders are followed. LM 12/2/21)

Resident #2 moved from the facility on 11.17.2021.

Completion Date: 12/09/2021