pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: January 8, 2015

Mr. George S. Repchick, President
Green Ridge Personal Care, LLC
26691 Richmond Road
Bedford Heights, Ohio 44146

RE: The Gardens of Green Ridge
2751 Boulevard Avenue
Scranton, Pennsylvania 18509
Certificate #: 225160

Dear Mr. Repchick:

As a result of the Department of Human Services' licensing inspection on October 31, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Sincerely,

Gloria Emick

Gloria Emick
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY
Assisted Living Residences - 55 Pa.Code § 2800

Name of Residence: The Gardens of Green Ridge

Address: 2751 Boulevard Avenue, Scranton, Pennsylvania 18509

License Number: 225160

Type of Inspection: Partial

Reason(s) for Inspection: Compliant

Notice: Unannounced

On-site Inspection Dates and Department Representatives On-site:
10/31/14 – Israel Springs, Rebecca Riel

Off-site Inspection Dates and Department Representatives, if Applicable:

RECEIVED
DEC 08 2014
CENTRAL
FIELD OFFICE

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.15(a) The residence shall immediately report suspected abuse of a resident served in the residence in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § § 15.21—15.27 (relating to reporting suspected abuse, neglect, abandonment or exploitation) and comply with the requirements regarding restrictions on staff persons. .

Violation:

Staff person A was accused of physically abusing Resident #1 on 10/26/14. The incident was not reported to The Bureau of Human Services Licensing (BHSL) until the Lackawanna Area Agency on Aging notified BHSL on 10/28/14.

Plan of Correction

Staff person A was terminated on 10-31-14. A change of administration in the facility went into effect on 11-7-14. Staff was in-serviced on reg. 2800.15(a) on 12-3-14 (see attached) and training on abuse & neglect on 11-4-14 (see attached) Administrator/designee will report any suspected abuse to residents to BHSL & Lackawanna Area Agency on Aging & law enforcement if needed, to be in compliance w. the reg 2800.15(a)

Printed Name and Title of Legal Entity Representative (Required on all pages) Leslie Yuhas

Signature of Legal Entity Representative (Required on all pages) Leslie Yuhas Date 12-5-14

DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1-8-15 (Date)

The above plan of correction was approved by SE (Initials)

Plan of correction implementation status as of 1-8-15 (Date)

☐ Fully Implemented

☒ Partially Implemented – Adequate Progress

☐ Partially Implemented – Inadequate Progress

☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.15(b) If there is an allegation of abuse of a resident involving a residence's staff person, the residence shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Violation:

In review of the staff schedule and interview of Staff Person A, the accused was allowed to continue working on Sunday, 10/26/14 and Monday, 10/27/14 after the allegation of abuse was reported and the alleged perpetrator was identified.

Plan of Correction

Staff person A was terminated on 10-31-14. New administration of facility went into effect 11-7-14. Staff was in-serviced on reg 2800.15(6) on 12-3-14 (see attached) Administrator will assure any staff person involved in alleged abuse will immediately be removed from staff schedule until an investigation is complete to be in compliance with reg 2800.15(6)

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuehes
Signature of Legal Entity Representative (Required on all pages)	Leslie Yuehes Date 12-5-14

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Plan of correction implementation status as of 1-8-15. (Date)

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- ☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation

§ 2800.15(c) The residence shall immediately submit to the Department's assisted living residence office a plan of supervision or notice of suspension of the affected staff person.

Violation:

No plan of supervision or notice of suspension was received by the Department until inspectors were on site on 10/31/14. The residence attempted to back-date the documents to the date of the incident.

Plan of Correction

New administration of facility went into effect 11-7-14
The effected person was terminated on 10-31-14
Forthgoing, the administrator will remove any staff person immediately from staff schedule involved in any form of resident abuse, and BHLS will be notified immediately to be in compliance with reg 2800.15(c)

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Signature of Legal Entity Representative (Required on all pages)	Leslie Yuhas Date 12-5-14

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Plan of correction implementation status as of 1-8-15 (Date):

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- ☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:
§ 2800.16 (a)(9) A reportable incident or condition includes a physical or sexual assault by or against a resident.

Violation:
No report of the 10/26/14 incident was ever received by the BHSL. A copy was provided to the inspectors when onsite five days after the alleged incident.

Plan of Correction

New administration went into effect on 11-7-14
Staff have been in-serviced on reg 2800.16(a)(9) 12-3-14
(see attached) & instructed to immediately report
any form of resident abuse to administrator/designee.
Administrator/designee will review all resident
incident reports & will assure to report any
reportable incidents or conditions to BHSL to be in
compliance with reg 2800.16(a)(9).
All new hire staff will be in-serviced on
reg 16(a)(9) upon new hire orientation
to assure ongoing compliance of reg 2800.16(a)(9).

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuhas
Signature of Legal Entity Representative (Required on all pages) Leslie Yuhas	Date 12-5-14

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- ☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:
§ 2800.16 (c) The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. The residence shall immediately report the incident or condition to the resident's family and the resident's designated person. Abuse reporting must also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law).

Violation:
The residence never contacted the Department's assisted living residence office or the assisted living residence complaint hotline about the incident on 10/26/14.

Plan of Correction

New administration of facility went into effect on 11-7-14. Facility RN & LPN in-serviced on reg 2800.16(c) - see attached - on 12-3-14 to assure reporting of incidents & conditions to BHLS within 24hrs. Administrator will be notified immediately of any & all reportable incidents / conditions to assure compliance of reg 2800.16(c). Administrator will review all incident reports on a regular basis to assure compliance of reg 2800.16(c).

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuhas
Signature of Legal Entity Representative (Required on all pages) Leslie Yuhas	Date 12-5-14

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LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.42 (b) A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. A resident must be free from mental, physical, and sexual abuse and exploitation, neglect, financial exploitation and involuntary seclusion.

Violation:

In review of the security video from 10/26/14 there were numerous incidents where Staff Person A taunted and harassed Resident #1. The incidents included the following:

1) Resident #1 was sitting by the nurse's station. Staff person A was standing over the resident. Resident A attempted to hit/push Staff Person A away.
2) Resident #1 and Resident #2 were sitting in front of the nurse's station again and Staff Person A stood in front of Resident #1 with his/her hands on his/her hips and began dancing in front of the resident. Resident #1 struck out at Staff Person A. The staff person backed up and the resident walked away. The staff went after Resident #1.
3) Resident #1 sat down in front of the nurse's station. Staff Person A sat down shortly after. Resident #1 got up and walked away with Staff Person A following after the resident.
4) Resident #1 sat in the activity area at a table under the camera. Staff persons A and B forcefully escorted the resident back to their room. The resident resisted.
5) Staff B stood at the door, holding it to prevent Resident #1 from coming out of their room.

Plan of Correction

New administration of facility went into effect 11-7-14. Staff person A was terminated on 10-31-14. Staff person B was removed from staff schedule on 11-3-14 under suspension and terminated on 11-6-14. Staff was inserviced on reg 2800.42(b) on 12-3-14 (see attached) & instructed to contact admin/designee immediately for any violation of reg 2800.42(b). Administrator will assure to immediately respond, investigate & report to be in compliance with reg 2800.42(b)

Printed Name and Title of Legal Entity Representative (Required on all pages) Leslie Uribes

Signature of Legal Entity Representative (Required on all pages) Leslie Uribes Date 12-5-14

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The above plan of correction is approved as of 1-9-15 (Date)

The above plan of correction was approved by SR (Initials)

Plan of correction implementation status as of 1-9-15 (Date)

☐ Fully Implemented

☒ Partially Implemented – Adequate Progress

☐ Partially Implemented – Inadequate Progress

☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.42 (c) A resident shall be treated with dignity and respect.

Violation:

1) Resident #1 and Resident #2 were sitting in front of the nurse's station again and Staff Person A stood in front of the resident with his/her hands on his/her hips and began dancing in front of the resident. The resident struck out at Staff Person A. The staff person backed up and the resident walked away. The staff went after the resident.
2) Resident #1 was forcefully removed from the dining/activity area by Staff Persons A and B while sitting at the table.

Plan of Correction

New administration went into effect 11-7-14
Staff person A was terminated on 10-31-14.
Staff person B was removed from schedule on 11-3-14 (Suspension) & terminated on 11-6-14
Staff was inserviced on reg 2800.42(C) on 12-3-14 (see attached). Staff instructed to report any residents not being treated with dignity & respect to admin/designee which will be acted upon & reported immediately to be in compliance with reg 2800.42(C)

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuhas
Signature of Legal Entity Representative (Required on all pages)	Leslie Yuhas Date 12-5-14

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The above plan of correction was approved by ___ (Initials)

Plan of correction implementation status as of 1-8-15 (Date):

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- ☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:
§ 2800.42 (p) A resident shall be free from restraints.

Violation:
The residence used PRN medication as a chemical restraint on the following dates per the current MAR:
1) 10/3/14 – 8:00pm – 0.5 mg Ativan – Agitation
2) 10/4/14 – 2:00 pm – 0.5 mg Ativan – Agitation
3) 10/4/14 – 8:00 pm – 0.5 mg Ativan – Agitation
4) 10/5/14 – 7:30 am – 0.5 mg Ativan – Agitation
5) 10/5/14 – 6:00 pm – 0.5 mg Ativan – Agitation
6) 10/8/14 – 12:00 am – 0.5 mg Ativan – Agitation

Plan of Correction

An audit of resident MAR's were completed on 11/26/14. To assure medications are not being administered as a restraint. The resident in which Prn medication was given to was discharged on 11-17-14 therefore unable to contact physician regarding diagnosis of medication. Staff have been in-serviced on reg 2800.42(p) - see attached - on 12-3-14. The facility RN + LPN will review all physician orders to assure medications are not being prescribed as a restraint and will do weekly audit of MAR's to assure medications are being administered appropriately to be in compliance with reg. 2800.42(p).

Printed Name and Title of Legal Entity Representative (Required on all pages) Leslie Yukas

Signature of Legal Entity Representative (Required on all pages) Leslie Yukas Date 12-5-14

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☐ Partially Implemented – Inadequate Progress

☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:
§ 2800.65 (g) Direct care staff persons may not provide unsupervised assisted living services until completion of 18 hours of training that includes a demonstration of job duties, followed by supervised practice; successful completion and passing the Department-approved direct care training course and passing of the competency test; initial direct care staff person training to include safe management techniques; assisting with ADLs and IADLs; personal hygiene; care of residents with mental illness, neurological impairments, mental retardation and other mental disabilities; the normal aging-cognitive, psychological and functional abilities of individuals who are older, implementation of the initial assessment, annual assessment and support plan; nutrition, food handling and sanitation; recreation, socialization, community resources, social services and activities in the community; gerontology; staff person supervision, if applicable; care and needs of residents with special emphasis on the residents being served in the residence; safety management and hazard prevention; universal precautions; the requirements of this chapter; the signs and symptoms of infections and infection control; care for individuals with mobility needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the residence; behavioral management techniques; understanding of the resident's assessment and how to implement the resident's support plan; and person-centered care and aging in place.

Violation:
Staff Person B did not complete the required training before being allowed to work unsupervised.

Plan of Correction

New Administration of facility went into effect on 11-7-14. Staff person B was terminated on 11-6-14. Staff training plan will be audited mthly by administrator to assure appropriate training of staff & to be in compliance with reg 2800.65(g)
Business Office Manager will maintain training records & notify admin/designee when a staff person's 18 hours of training has been completed to assure compliance of reg 2800.65(g).

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Signature of Legal Entity Representative (Required on all pages) Leslie Yuhas	Date 12-5-14

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☐ Not Implemented

LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.225 (a)(2) The administrator or administrator designee, or an LPN, under the supervision of an RN, or an RN shall complete additional written assessments for each resident. A residence may use its own assessment form if it includes the same information as the Department's assessment form. Additional written assessments shall be completed if the condition of the resident significantly changes prior to the annual assessment.

Violation:

Staff Person C was observed updating the ASP for Resident #1 in the Administrator's office after a review of the resident record did not show a required revision.

Plan of Correction

Staff person C was terminated on 11-6-14. New facility RN & LPN who will complete ASP's were in-serviced on reg 2800.225(a)(2) on 12-3-14- fee attached - Administrator will do quarterly random audits of ASP's to assure compliance of reg 2800.225(a)(2).

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuhas
Signature of Legal Entity Representative (Required on all pages)	Leslie Yuhas Date 12-5-14

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LIS – [The Gardens of Green Ridge] – [10/31/14] – [Israel Springs]

Regulation:

§ 2800.236.(a) Each direct care staff person working in a special care unit for residents with Alzheimer's disease or dementia shall have 8 hours of initial training within the first 30 days of the date of hire and a minimum of 8 hours of annual training related to dementia care and services, in addition to the 16 hours of annual training specified in § 2800.65 (relating to staff orientation and direct care staff person training and orientation).

Violation:

Staff Person A did not complete the required initial 8 hours of dementia training.

Plan of Correction

Staff person A was terminated on 10-31-14. Administrator / designee will conduct and/or recruit trainers or dementia training within 8 hrs. of initial training & within 30 days of date of hire and for a minimum of 8 hrs. annually. Administrator / designee will monitor to ensure compliance of reg 2800.236(a)

Printed Name and Title of Legal Entity Representative (Required on all pages)	Leslie Yuhas
Signature of Legal Entity Representative (Required on all pages) Leslie Yuhas	Date 12-5-14

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