



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: August 20, 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 June 29, 2015 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,

A handwritten signature in cursive script that reads "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 Ave Scranton, Pennsylvania 18509
License Number: 22516
Type of Inspection: Partial
Reason(s) for Inspection: Complaint/Incident
Notice: Unannounced
On-site Inspection Dates and Department Representatives On-Site: 6/29/2015- Dale Rosenblat
Off-Site Inspection Dates and Inspectors, if Applicable:

RECEIVED

AUG 10 2015

CENTRAL REGION FIELD OFFICE
Human Services Licensing

Regulation

§ 2800.141. Resident medical evaluation and health care.

(b) A resident shall have a medical evaluation:

(1) At least annually.

Violation

Resident #1's last medical evaluation (ADME) was completed on 1/24/2014.

Plan of Correction

Resident #1

2800.141 **ADME.** Community made a change in Resident Services Director (RSD) in part, to better ensure that ADME's and similar documents are completed as required and when required. New RSD was hired in late June and has conducted an audit to review ADME's on all residents for compliance.

Resident #1 passed on June 2, 2015.

RSD is new to Assisted Living and is becoming acclimated to the 2800 regulations and has now adopted a system from a sister community to better manage time-sensitive compliance requirements.

Executive Director along with nursing will review monthly which residents were due for time-sensitive updates or changes in condition that would trigger the need for an update. This information will be reviewed as part of the clinical segment of daily meeting.

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

Joseph F. KAUCZKA

Signature of Legal Entity Representative (Required on all pages)

Joseph F. Kauczka

Date

8-10-15

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

The above plan of correction is approved as of 8-20-15
(Date)

Plan of correction implementation status as of 8-20-15
(Date)

Fully Implemented

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

Partially Implemented – Adequate Progress

Partially Implemented – Inadequate Progress

Not Implemented

Regulation

§ 2800.234. Resident care.

(d) Review of plans.

(1) The support plan for a resident of a special care unit for residents with Alzheimer's disease or dementia shall be reviewed, and if necessary, revised at least quarterly and as the resident's condition changes.

Violation

Resident #1 has an Assessment-Support Plan (ASP) dated 1/27/2015 but quarterly reviews were not completed.

Plan of Correction

Resident #1

2800.141 ASP. Community made a change in Resident Services Director (RSD) in part, to better ensure that ASP's, ADME's and similar documents are completed as required and when required. New RSD was hired in late June and has conducted an audit to review ADME's on all residents for compliance.

Resident #1 passed on June 2, 2015.

RSD is new to Assisted Living and is becoming acclimated to the 2800 regulations and has now adopted a system from a sister community to better manage time-sensitive compliance requirements.

Executive Director along with nursing will review monthly which residents were due for time-sensitive updates or changes in condition that would trigger the need for an update. This information will be reviewed as part of the clinical segment of daily meeting.

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Joseph F. KAWCZKA

Signature of Legal Entity Representative (Required on all pages)

Joseph F. Kawczka

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Regulation

§ 2800.231. Admission.

(b) *Medical evaluation.* A resident or potential resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission.

Violation

Resident #2, admitted 5/29/2015, did not have a medical evaluation completed within 60 days prior to admission to the Special Care Unit (SCU).

Plan of Correction

Resident #2

2800.231 Medical Examination. Resident was admitted to the Special Care Unit (SCU) on 5-29-15 as indicated. Move to SCU was prompted by an elopement of the resident who was able to articulate that she was out looking for her mother and father. Incident occurred on Friday afternoon when no physician or anyone from his office available. Resident was sent out as a precautionary exam and returned with no injuries. Family was contacted and daughters (both nurses) agreed that upon "mom's" return to community that she would need to move to SCU for safety purposes. Community was in the process and had a meeting scheduled in a week to discuss their mothers increased confusion and safety implications prior to the elopement.

At the time, Memory Care Coordinator was on a short-term medical leave while community was in the process of recruiting a new Resident Services Director. Interim nurse on duty at the time was unfamiliar with required medical evaluation until the error was discovered. At the time, obtaining required documentation within 60 days prior to admission was not possible.

Resident Services Director and/or Memory Coordinator are responsible for this requirement. Both are currently in place.

Again, Executive Director along with Resident Services Director and /or Memory Care Coordinator will review and changes in condition and/or incidents that would require additional supporting documentation such as admission to a SCU in the medical record. This information will be reviewed as part of the clinical segment of daily meeting as well.

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Joseph F. KAUCZKA

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Regulation

§ 2800.231. Admission.

(c) Preadmission screening.

(1) Special care unit for residents with Alzheimer's disease or dementia.

(i) A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's cognitive preadmission screening form shall be completed for each resident within 72 hours prior to admission to a special care unit.

Violation

Resident #2, did not have a cognitive screening completed within 72 hours prior to admission to the SCU.

Plan of Correction

Resident #2

2800.231 Preadmission Screening. Resident was admitted to the Special Care Unit (SCU) on 5-29-15 as indicated. Move to SCU was prompted by an elopement of the resident who was able to articulate that she was out looking for her mother and father. Incident occurred on Friday afternoon when no physician or anyone from his office available. Resident was sent out as a precautionary exam and returned with no injuries. Family was contacted and daughters (both nurses) agreed that upon "moms" return to community that she would need to move to SCU for safety purposes. Community was in the process and had a meeting scheduled in a week to discuss their mothers increased confusion and safety implications prior to the elopement.

In addition, Memory Care Coordinator was on a short-term medical leave while was in the process of recruiting a new Resident Services Director. Interim nurse on duty at the time was unfamiliar with completing the required medical evaluation/preadmission screening at the time until the error was discovered. At the time, obtaining required documentation within 60 days prior to admission was not possible.

Resident Services Director and/or Memory Coordinator are responsible for this requirement. Again, Executive Director along with Resident Services Director and /or Memory Care Coordinator will review and changes in condition and/or incidents that would require additional supporting documentation such as admission to the SCU in the medical record. This information will be reviewed as part of the clinical segment of daily meeting as well.

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