



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 08 2018

Mr. William I. Weisberg
Vice 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
License #225160

Dear Mr. Weisberg:

As a result of the Department of Human Services' annual licensing inspection on November 2, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Licensing Inspection Summary

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

ALR Name: The Gardens of Green Ridge	License Number: 225160
Address: 2751 Boulevard Avenue Scranton, PA 18509	County: Lackawanna
Administrator: Connie Bills	
Legal Entity Name: Green Ridge Personal Care, LLC	
Legal-Entity-Address: 26691 Richmond Road Bedford Heights, OH 44146	
Certificate(s) of Occupancy: 1-1 09/12/2013	
Type of Inspection: Full	
Reason(s) for Inspection(s): Renewal Inspection	
On-Site Inspections Dates and Department Representatives On-Site: 11/2/17 James Jesse Hummel, Amy DeLuca, Ryan Novak	
Off-Site Inspection Dates and Inspectors, If Applicable:	
Resident Demographic Data as of Inspection Dates	
Licensed Capacity: 74 Number of Residents Served: 47 Secured Dementia Care Unit In Home: Yes Area: 1st floor rear wing Secured Unit Capacity, if Applicable : 24 Number of Residents Served in Secured Dementia Care Unit, if applicable: 12 Number of Current Hospice Residents: 4 Number of Hospice Residents in past year: 16	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 47 Have Mental Illness: 3 Have an Intellectual Disability: 0 Have a Mobility Need: 14 Have a Physical Disability: 0

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

Regulation 2800.3(d) – The assisted living residence shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the assisted living residence.

Violation The licensing inspection summary dated 9/21-9/22/17 is not posted in a public conspicuous area of the home.

Plan of Correction

The licensing inspection summary dated 9/21-9/22/17 was placed in a conspicuous place in the lobby.

Going forward the ED will ensure that a copy of all summaries and inspections will be placed in a conspicuous place in the lobby.

Printed Name and Title of Legal Entity Representative (Required on all pages) Cornie L. Bilslyn Executive Director

Signature of Legal Entity Representative (Required on all pages) Cornie L. Bilslyn Date 12/18/17

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

The above plan of correction is approved as of 12-27-17
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

Plan of correction implementation status as of 12-27-17:
 (Date)

- Fully Implemented
- Partially Implemented – Adequate Progress
- Partially Implemented – Inadequate Progress
- Not Implemented

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

Regulation 2800.18 - A residence shall comply with applicable Federal, State and local laws, ordinances and regulations.

Violation Department Representatives observed the Carbon Monoxide Alarm located in the dining room. The battery was installed on 10/12/16 and is/was required to be replaced by 10/12/17 according to the Care Facility Carbon Monoxide Alarms Standards Act.

Plan of Correction

Battery was changed and dated in CO alarm in dining room.
 Maintenance Director is responsible for checking all CO alarms weekly for operating capability. He will also do annual checks to change batteries + date them.
 He will fill out audits + EO will review them for accuracy.
 (See attachment A+B)
 Training was also supplied to ATFF regarding importance of CO monitors
 (see attachment C)

Sample of checklist provided

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Bilsler Executive Director

Signature of Legal Entity Representative (Required on all pages): Connie Bilsler Date 12/18/17

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

Regulation 2800.25(c)(2) - The contract shall specify a fee schedule that lists the actual amount of charges for each of the assisted living services that are included in the resident's core service package in accordance with § 2800.220 (relating to service provision).

Violation Resident # 1's contract dated [redacted] 17 does not include a fee schedule.

Plan of Correction

All new residents received new packets of admission paperwork which contains all proper information + fee schedule. (see attachment E)

all current residents were given a 30 day notice regarding the changes to the fee schedule
 (see attachment F)

Going forward, the E.L. will check all admission paperwork for it's completeness + correctness upon admission

Resident #1 was given copy of new fee schedule and had her sign it. It was then attached to her contract.
 (see attachment G)

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Bills Van Executive Director

Signature of Legal Entity Representative (Required on all pages) Connie L. Bills Van Date 12/27/17

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

Regulation 2800.25(c)(5) - The contract shall specify the method for payment of charges for long distance telephone calls.
Violation Resident # 1's contract dated [REDACTED] 17 does not indicate the charge for long distance phone calls.
Plan of Correction <p style="font-family: cursive;">Resident #1 was given copy of new fee schedule reflecting long distance phone calls. Resident #1 signed it. (see attachment G)</p> <p style="font-family: cursive;">All new residents received new packets of admission paperwork which contains all proper information + fee schedule. (see attachment E)</p> <p style="font-family: cursive;">All current residents were given a 30 day notice regarding the changes to the fee schedule (see attachment F)</p> <p style="font-family: cursive;">Going forward the E.S. will check all admission paperwork for it's completeness + correctness upon admission.</p> <p style="font-family: cursive;">documents provided. <i>CF</i></p>

Printed Name and Title of Legal Entity Representative (Required on all pages) <i>Connie L. Bills, LP Executive Director</i>	
Signature of Legal Entity Representative (Required on all pages) <i>Connie L. Bills</i>	Date <i>12/19/17</i>
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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2800.54(d).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary assisted living services with reasonable skill and safety.
- (4) Be able to communicate in a mode or manner understood by the resident.

Violation Direct care staff person A was hired on 12/21/16. Staff person A does not have a High School Diploma, GED Diploma, or active registry on the PA nurse aid registry

Plan of Correction

Staff Person A did not try to be deceitful in any way. She thought it was a legitimate school for her GED. The ED called the PA Board of Education to see if Staff Person's A GED was recognized. It was not. Staff Person A has since reappplied for her GED through a proven legitimate school. Staff Person A was also instructed that she must complete her GED within 6 months. (see attachment 8) DCCC. Business of Manager will be responsible for checking all diplomas / GEDs. If there is a question of legitimacy Bom is to let ED know and PA Board of ED will be contacted. The Administrator will oversee to ensure ongoing compliance.

Printed Name and Title of Legal Entity Representative (Required on all pages) Cornie L. Bilsen Executive Director

Signature of Legal Entity Representative (Required on all pages) Cornie Bilsen Date 12/18/17

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

Regulation 2800.85(a) - Sanitary conditions shall be maintained.

Violation The microwave located in the kitchen in the special care unit was caked with dry food throughout.

Plan of Correction

Microwave was cleaned immediately.
 Training was done with staff regarding sanitary conditions
 (see attachment C) & so.

Going forward area is to be cleaned daily by 11-7 Nursing Staff.
 Audit sheet is to be utilized & completed.
 (see attachment H)

E.D. will check audit sheets weekly & check kitchen area
 in SDU Monday - Friday for cleanliness.

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Billon Executive Director

Signature of Legal Entity Representative (Required on all pages) Connie L. Billon

Date 12/19/17

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

Regulation 2800.102(i) – Bar soap or a dispenser with soap shall be provided within reach of each bathroom sink. Bar soap, however, is not permitted when a living unit is shared unless there is a separate bar clearly labeled for each resident sharing the living unit.

Violation Room # 407 which is a double occupancy room has unlabeled wash clothes in the bathroom.

9000 4/102(K)

Plan of Correction

Room # 407 was labeled and all other double occupancy rooms were checked to see if they needed labels. If they did labels were applied.

Training was done with staff regarding regulation regarding all double occupancy rooms having proper labeled areas.
 (see attachment C)

Going forward, Housekeeping will be responsible to check for labels, emergency phone numbers at phones, working lamps, placement of lamps, trash cans, vents, cleanliness and mirror.
 (see attachment I)

Director of Maintenance will check audits weekly and make any repairs necessary. Towels left in any bathroom will be labeled - or the towel bars may be labeled.

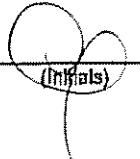
The Administrator will oversee to ensure ongoing compliance.

Printed Name and Title of Legal Entity Representative (Required on all pages) **Connie L. Billson Executive Director**

Signature of Legal Entity Representative (Required on all pages) *Connie L. Billson* Date **12/19/17**

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

Regulation 2800.102(k) - Use of a common towel is prohibited.

Violation Room # 407 which is a double occupancy room has an unlabeled bar of soap in the shower.

9000 41 102(k)

Plan of Correction

Bar of Soap was disposed of.

Training was done with staff regarding regulation regarding all double occupancy rooms having proper labeled items.
 (see attachment c)

Going forward, Housekeeping will be responsible to check for labeled items.
 (see attachment I)

Director of Maintenance will check audits weekly
 Administrator will oversee to ensure ongoing compliance.

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

Connie L. Bills, Executive Director

Signature of Legal Entity Representative (Required on all pages)

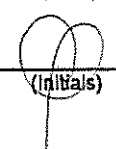
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Date

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

Regulation 2800.103(g) - Food shall be stored in closed or sealed containers.

Violation The continental refrigerator located in the special care unit contained a bowl of pineapples and a pumpkin roll that was not covered.

Plan of Correction

Food stuffs were removed and disposed of.

Training was done with staff regarding sanitary conditions
 + food needing to be covered + dated
 (see attachment c)

Going forward, refrigerator to be checked + cleaned, if needed, by
 11-7 Nursing Staff.

Audit sheet is to be utilized + completed
 (see attachment H)

ED will check audit sheets weekly + check kitchen area in Sbx
 Monday-Friday for cleanliness. Will also check for any foods
 that are uncovered + not dated. Will dispose of these items if
 found.

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

Connie L. Bills, Executive Director

Signature of Legal Entity Representative (Required on all pages)

Connie L. Bills

Date

12/19/17

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

Regulation 2800.121(a) - Stairways, hallways, doorways, passageways and egress routes from living units and from the building must be unlocked and unobstructed.

Violation Department Representatives observed the exit door leading from the facility adjacent to resident room 306. The door is locked magnetically and the code for operation is not posted near the door. The door is located outside of the specialized care unit of the facility and cannot be equipped with a magnetic locking mechanism.

Plan of Correction

Lock was disabled at time of inspection by Maintenance Director.

Maintenance Director was made aware of Regulation

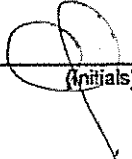
The Administrator will conduct periodic walk throughs of the building to ensure continued compliance. OP.

Printed Name and Title of Legal Entity Representative (Required on all pages) *Conne L. Bittly Executive Director*

Signature of Legal Entity Representative (Required on all pages) *Conne L. Bittly* Date *12/19/17*

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LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.124 - The residence shall notify the local fire department in writing of the address of the residence, location of the living units and bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

Violation The home's notice to the fire department indicates that 15 residents with mobility needs are being served, the home currently serves 14 residents with mobility needs. The notice to the fire department was not updated to include this change.

Plan of Correction

An updated listing of mobile residents was faxed to the Fire Department by the Maintenance Director.
(see attachment J)

Going forward E.S. will ensure letter contains verbiage such as "facility services both mobile and immobile residents" without using specific number of immobile residents.

Administrator will oversee to ensure ongoing compliance.

The letter must also include the assistance needed to evacuate in an emergency - listing "immobile" is insufficient. The home will send the updated letter to the Northeast Regional Office for review.

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

Connie L. Birkle Executive Director

Signature of Legal Entity Representative (Required on all pages)

Connie Birkle

Date

12/19/17

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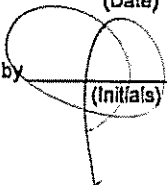
The above plan of correction was approved by

[Signature]
(Initials)

- Fully Implemented
- Partially Implemented – Adequate Progress *needs update*
- Partially Implemented – Inadequate Progress
- Not Implemented

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

Regulation 2800.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.
Violation The home's laundry room had a thick accumulation of lint and dust behind the dryers. A pile of clothing covered with a layer of lint were also found behind the dryers. These combustible items pose a fire risk.
Plan of Correction Lint was removed. Training was done with staff regarding importance of dryers being free of lint due to fire hazard. (see attachment c) No Going forward, Director's Maintenance will check daily behind dryers + lint traps. If areas need to be clean - will instruct housekeeping to clean area. Signs were placed on dryers as reminders to remove lint from traps after each use. Director of maintenance will complete audit + ED will check weekly for issues + completeness (see attachment K) Yes

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Signature of Legal Entity Representative (Required on all pages)	Date
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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Violation The home's most recent supervised fire drill was conducted on 3/30/2017. The previous supervised fire drill was conducted on 02/03/2016. The supervised fire drill for 2017 was not completed timely.

Plan of Correction

Going forward the ED will ensure the supervised fire drill will be conducted within the 12 month period as per regulation.

Printed Name and Title of Legal Entity Representative (Required on all pages) *Connie L. Bills (Executive Director)*

Signature of Legal Entity Representative (Required on all pages) *Connie L. Bills* Date *12/20/17*

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

Regulation 2800.144(c) - A residence that permits smoking inside or outside of the residence shall develop and implement written fire safety policy and procedures that include the following:

- (1) Proper safeguards inside and outside of the residence to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the residence, extinguishing procedures, fire resistant furniture both inside and outside the residence and fire extinguishers in the smoking rooms.
- (2) Location of a smoking room or outside smoking area a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.
- (3) Prohibition of the use of tobacco during transportation by the residence.

Violation Approximately 12 extinguished cigarette butts were located on the ground near the picnic table in the home's designated smoking area.

Plan of Correction

*Cigarette butts were cleaned up immediately
 Training was given to staff regarding the regulation, sanitation and fire hazard
 (see attachment c) (20)*

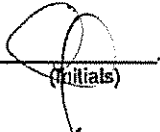
*All Maintenance Director will do daily checks of designated smoking area for proper disposal of butts. If area is not clean, Maintenance Director will ensure that area gets cleaned.
 Maintenance Director will also complete audits + ED will check weekly
 (see attachments K+L) (21)*

Printed Name and Title of Legal Entity Representative (Required on all pages) *Connie L. Bilby, Executive Director*

Signature of Legal Entity Representative (Required on all pages) *Connie L. Bilby* Date *12/20/17*

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

Regulation 2800.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, RN, certified registered nurse practitioner, LPN or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the residence.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the residence.
- (4) A staff person who has completed the medication administration training as specified in § 2800.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Violation Staff person B and staff person C administer medications to residents of the facility. Staff person B has not completed the medication administration initial training. Staff person C's medication administration annual practicum does not indicate the trainer's signature or the student's pass date. Staff person B and C have not completed the required training in order to administer medications.

Plan of Correction

Staff person C's Annual Practicum was completed by Trainer
 (see attachment Q) YES

Staff person B has never passed medication yet. She left employment in September + returned in late September as of [redacted] She is in an [redacted] when she returns Initial Observations will be completed by a Trainer + form completed.

Trainer forwarded REC will monitor when trainings are due + inform Administrator will oversee to ensure ongoing compliance. Q

Printed Name and Title of Legal Entity Representative (Required on all pages)		Connie L. Bilog Executive Director	
Signature of Legal Entity Representative (Required on all pages)		Date 12/25/17	
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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.184(a) - The original container for prescription medications must be labeled with a pharmacy label that includes the following:
 (1) The resident's name.
 (2) The name of the medication.
 (3) The date the prescription was issued.
 (4) The prescribed dosage and instructions for administration.
 (5) The name and title of the prescriber.

Violation Resident # 2's Medication Administration Record indicates to administer lorazepam .5mg 1 tablet every 8 hours as needed. The label to the medication incorrectly indicates to administer lorazepam .5mg 1 tablet daily as needed.

Plan of Correction

New label was applied, from pharmacy, to resident #2's lorazepam medication.

Training was given to staff regarding regulation and the importance of label on medication matching the MAR.
(see attachment c) (10)

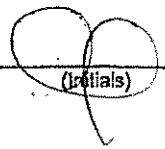
Staff forwarded the Resident Care Director will be responsible for doing med cart audits Bi-monthly to ensure medications are present + medication labels match the MAR.

ED will check audit monthly to ensure completeness
(see attachment m) (10)

Printed Name and Title of Legal Entity Representative (Required on all pages) *Connie L Bills LA Executive Director*

Signature of Legal Entity Representative (Required on all pages) *Connie L Bills* Date *12/20/17*

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

Regulation 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.

Violation Resident # 2's prescribed medication: tolterodine tartrate 2mg was not available in the facility at the time of the inspection.
 Resident # 3's prescribed medication: transderm - scop patch was not available in the facility at the time of the inspection.

Plan of Correction

Medications were obtained from the pharmacy that day.

Training was given to staff regarding regulation and the importance of facility. All prescribed medications in facility at all times.
 (see attachment c)

Going forward the resident care Director will be responsible for doing med cart audits Bi-monthly to ensure medications are present.
 ED will check audit monthly to ensure completeness
 (see attachment M)

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

Connie L. Billigan Executive Director

Signature of Legal Entity Representative (Required on all pages)

Connie L. Billigan

Date

12/20/17

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The above plan of correction is approved as of 12-27-17
 (Date)

Plan of correction implementation status as of 12-27-17:
 (Date)

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



- Fully Implemented
- Partially Implemented – Adequate Progress
- Partially Implemented – Inadequate Progress
- Not Implemented

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation 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.

Violation Resident # 3's prescribed morphine sulfate was not listed on the Medication Administration Record. Resident # 4 is prescribed miracle foot cream. The Medication Administration Record does not include a purpose or diagnosis.

Plan of Correction

Resident #3's morphine sulfate was added to MAR that day.
 Resident #4's miracle foot cream had diagnosis added of Dry Skin.
 Training was given to staff regarding regulation and the importance of ALL medications being MAR along with the diagnosis for each medication. (see attachment C) (Yes)

Going forward the Resident Care Director will be responsible for daily MAR checks for completeness + accuracy. The RCB will document this on audit sheet.
 ED will check audits weekly for completeness + issues.

(see attachment N) (Yes)

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Bilsby Executive Director

Signature of Legal Entity Representative (Required on all pages) Connie Bilsby Date 12/20/17

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

Regulation 2800.187(c) If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Violation Resident # 3 refused the prescribed medication: Metformin on 10/12/17 at 8am and 10/13/17 at 8am & 4pm. The home did not notify the prescriber regarding the refusals.

Plan of Correction

Resident #3's MD was notified of the refusals of Metformin.


Admin was given to staff regarding regulation and the importance of letting MD know when any prescribed medication is refused

(see attachment c)


Med tech's were given a "Refusal of Medication" form to fill out everytime a prescribed medication is refused. Form is to be faxed to MD the day the refusal occurs + then put on chart. The RCD will check to make sure form is on Resident's chart when a refusal is noted on MAR + check to see if there are any new orders.

This is to be done on an ongoing basis.

(see attachment d)

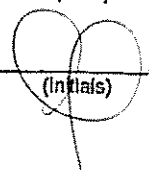
Administrator will oversee to ensure ongoing compliance. 

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Bills, Executive Director

Signature of Legal Entity Representative (Required on all pages)  Date 12/20/17

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


Regulation 2800.225(a) - 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 as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

Violation Resident # 5 had suffered falls in the resident's bedroom while attempting to transfer from the bed to a wheelchair on 9/7/17, 10/2/17, 10/3/17, and 10/4/17. The Assessment and Support Plan (ASP) dated 5/4/2017 was not updated to reflect the resident's increased risk of falls and to address the need to offer assistance to the resident in transferring in and out of bed.

Plan of Correction

Resident #5's ASP was updated to reflect that Resident has history of falls + needs assistance with transfers (see attachment 5) ~~4~~
 Resident Care Director instructed to make sure ASP's are updated timely + contain all changes with residents + their care.
 ED will double check ASP's monthly

Printed Name and Title of Legal Entity Representative (Required on all pages) <i>Connie L. Bills, Executive Director</i>	
Signature of Legal Entity Representative (Required on all pages) <i>Connie L. Bills</i>	Date <i>12/20/17</i>
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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.227(c) - The final support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment. The residence shall review each resident's final support plan on a quarterly basis and modify as necessary to meet the resident's needs.

Violation Resident # 6's most recent ASP was completed on 1/12/17. The home completed quarterly reviews on 3/1/17 & 6/1/17. Quarterly updates are not being during each quarter (3 months).

Plan of Correction

The Resident Care Director will ensure that the quarterly reviews are completed every 3 months as per regulation.

A spread sheet was completed for each month with residents names for that month which are due.

The Resident Care Director will be responsible for updating these lists.

(see attachment P)

The Administrator will ~~oversee~~ oversee to insure ongoing compliance.

Printed Name and Title of Legal Entity Representative (Required on all pages) Connie L. Birk Co. Executive Director

Signature of Legal Entity Representative (Required on all pages) Date 12/20/17

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