



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]

Mailing Date: February 5, 2019

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's Bureau of Human Services Licensing inspection on August 24, 2018 of the above facility, the citations with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with **Choose an item.** must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano  
Human Services Licensing Supervisor

Enclosure  
Violation Report

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

<b>Name of Assisted Living Residence:</b> The Gardens of Green Ridge	<b>License Number:</b> 225160
<b>Address:</b> 2751 Boulevard Avenue, Scranton, Pa. 18509	<b>County:</b> Lackawanna
<b>Administrator:</b> Bayard Williams	
<b>Legal Entity Name:</b> Green Ridge Personal Care, LLC	
<b>Legal Entity Address:</b> 26691 Richmond Road, Bedford Heights, Ohio 4414	
<b>Certificate(s) of Occupancy:</b> I-1, 09/12/2013	
<b>Type of Inspection:</b> Partial	
<b>Reason(s) for Inspection(s):</b> Complaint investigation	
<b>On-Site Inspections Dates and Department Representatives On-Site:</b> 8/24/2018 Duane Valence	
<b>Off-Site Inspection Dates and Inspectors, if Applicable:</b>	
<b>Resident Demographic Data as of Inspection Dates</b>	
<b>Licensed Capacity:</b> 74 <b>Number of Residents Served:</b> 58 <b>Secured Dementia Care Unit In Home:</b> yes <b>Area:</b> 1 <sup>st</sup> Floor rear wing <b>Secured Unit Capacity, if Applicable:</b> 24 <b>Number of Residents Served in Secured Dementia Care Unit, if applicable:</b> 18 <b>Number of Current Hospice Residents:</b> 2 <b>Number of Hospice Residents in past year:</b> 16	<b>Number of Residents who:</b> <b>Receive Supplemental Security Income:</b> 0 <b>Are 60 Years of Age or Older:</b> 58 <b>Have Mental Illness:</b> 0 <b>Have an Intellectual Disability:</b> 0 <b>Have a Mobility Need:</b> 33 <b>Have a Physical Disability:</b> 0

## LICENSING INSPECTION SUMMARY

### Assisted Living Residences – 55 Pa.Code § 2800

**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 shall also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law)

**Violation**– The home has failed to report to the Regional Assisted Living Licensing Office as required by this regulation that medication errors occurred on the morning of 7/23/2018. The medication errors occurred when staff person "A" failed to administer to resident #1, his/her Protonix 40mg medication at 6AM and resident #2's Synthroid 25mcg at 6AM and Protonix 40mg at 7AM. These medications were left by staff person "A" on resident #1 and #2's night stands. Staff person "A" documented the medication administration records for residents #1 and #2 as being administered. These medications which were in two separate cups were discovered by a family member who was visiting later in the morning on 7/23/2018. The family member reported and took residents #1 and #2's medications to the business manager.

**Plan of Correction**

- On 7/23/18 Resident #1 + Resident #2 specifically instructed including verbalities @ Staff person A to leave Medication @ bedside. They stated they were not ready to get up yet to take Medication(s), and to get out. Staff person A complied with Resident #1 + Resident #2.
- Medication(s) were Administered. There were no missed doses on 7/23/18
- There were no prescribed times by PCP the times listed were a matter of family/Resident #1 + Resident #2 Preference.
- Staff person A was instructed on proper Medication distribution per DHS Regulations.
- RCO and Executive Director monitors and consults with Regulation 2800.16(c)

Administrator will also ensure that all employees are familiar with all reportable events and how to communicate such information so the home may report these events timely. 1-25-19 AG

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

Bryant Williams Executive Director  
Signature of Legal Entity Representative (Required on all pages)

Date 7/21/18

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

The above plan of correction is approved as of 1-25-19  
(Date)

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

Plan of correction implementation status as of 1-25-19  
(Date)

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

## LICENSING INSPECTION SUMMARY

### Assisted Living Residences – 55 Pa.Code § 2800

**Regulation**

**Regulation 2800.182(c)** - Medication administration includes the following activities, based on the needs of the resident:

- (1) Identify the correct resident.
- (2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
- (3) Remove the medication from the original container.
- (4) Crush or split the medication as ordered by the prescriber.
- (5) Place the medication in a medication cup or other appropriate container, or in the resident's hand.
- (6) Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in § 2800.182(b)(4).
- (7) Complete documentation in accordance with § 2800.187 (relating to medication records).

**Violation** Staff person "A" failed to follow required Medication Administration training procedure. Resident #1's 6AM Protonix 40mg medication and resident #2's 6AM Synthroid 25mcg and 7AM Protonix 40mg medication were not administered to residents #1 and #2 by mouth as prescribed. The noted medications were left on each resident's bedside night stand and were not administered before staff person "A" completed their work shift at 7AM on the morning of 7/23/2018.

**Plan of Correction**

Staff Person A was inserviced on proper medication administration procedures and the further information on Medication Administration vs. Medication Self-Administration and any resident not listed. Able to self adm med cannot have prescribed / soon prescribed medication(s) @ bedside.  
 - RCD Reviewed and Inserviced all Medication techs on Reg 2800.182(c) 7/23/18

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

*Barbara Williams Executive Director*

Signature of Legal Entity Representative (Required on all pages)

Date *12/21/18*

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(Date)

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(Date)

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(Initials)

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**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** The home arbitrarily chose the time to administer resident #1's Protonix 40mg at 6AM daily. The home also arbitrarily chose resident #2's medications Synthroid 25mcg to be given daily at 6AM and resident #2's Protonix 40mg to be given daily at 7AM. These medications were not administered by staff person "A" at the times listed on the respective resident's medication administration record.

**Plan of Correction**

Staff Person A did provide Assisted Living Resident 1 and Resident #2 prescribed Medications @ Times noted, however Resident 1 + Resident 2 would not take @ present time as given.  
 - Staff Person A Informed on 2800.187(a)

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

Bonnie Williams Executive Director

Signature of Legal Entity Representative (Required on all pages)

Date 1/22/18

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

**Regulation 2800.187(b)** - The information in § 2800.187(a)(13) and § 2800.187(a)(14) shall be recorded at the time the medication is administered.


**Violation** Staff person "A" recorded on the medication administration record of resident #1 that he/she had administered Protonix 40mg to resident #1 between 6 and 7AM on 7/23/2018 that he/she had administered the medication as prescribed. Staff person "A" also recorded on the medication administration record for resident #2 that he/she had administered resident #2's Synthroid 25mcg and Protonix 40mg between the hours of 6 and 7AM on 7/23/2018 when in fact staff person "A" left the fore-mentioned medications on the bedside night stands for residents #1 and #2 and the medications were never administered.

**Plan of Correction**

- Medications for Resident #1 and Resident #2 were administered Prescribed Medications.
- There were no missed doses on 7/23/18.
- Staff person A has been instructed on proper procedures regarding Regulation 2800.187(b)

The issue of meds being administered at all vs. the med administration time being recorded at the time they were actually given to the resident is the distinction here. The home will review the difference between 187a and 187b and document the training with signature sheets. Upon completion of the training, the home will fax the training documentatin to the Regional Office. 1-25-19

AG

Printed Name and Title of Legal Entity Representative (Required on all pages)	
Bryan Williams Executive Director	
Signature of Legal Entity Representative (Required on all pages)	Date
	12/21/18
<b>DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
The above plan of correction is approved as of <u>1-25-19</u> (Date)	Plan of correction implementation status as of <u>1-25-19</u> (Date):
The above plan of correction was approved by <u>AG</u> (Initials)	<input type="radio"/> Fully Implemented <input checked="" type="radio"/> Partially Implemented – Adequate Progress <input type="radio"/> Partially Implemented – Inadequate Progress <input type="radio"/> Not Implemented

## LICENSING INSPECTION SUMMARY

### Assisted Living Residences – 55 Pa.Code § 2800

**Regulation 2800.187(d)** - The residence shall follow the directions of the prescriber.

**Violation** Staff person "A" failed to administer medications to residents #1 and #2 on the morning of 7/23/2018 as indicated in this report which has resulted in a medication error.

**Plan of Correction**

- Resident #1 and Resident #2 did not receive their Medication(s) at times per their Request
- Times noted are not prescribed times - times listed are @ the request of family + Resident 1 and Resident 2 \* The family does not request med adm times, the dr orders them (see 187d). 1-25-19 AG
- Medications were still administered on 7/23/18.
- Medication Technicians, including Staff Member A Inserved on 2800.187(d)

The home will review med orders and ensure that ordered times appear on the MAR as ordered by the dr. In cases where there is no specific time, the home will seek assistance from the prescriber on timeframes to administer the Rx in writing and update the MAR. 1-25-19 AG

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

*Raymond Williams Executive Director*  
 Signature of Legal Entity Representative (Required on all pages)

Date *7/24/18*

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

**Regulation 2800.188(b)-** A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

**Violation** Medication tech, staff person "A" failed to report the medication errors referenced in this report as required by this regulation and as required in section 4(a) and (b) of the home's "Medication Management Plan."

**Plan of Correction**

- Staff person A Inservice on Regulation 2800.188(b) Compliance
- RCO to Monitor Compliance of Regulation 2800.188(b).
- Executive Director to Monitor Medication Management Plan.

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

*Raymond Williams Executive Director*

Signature of Legal Entity Representative (Required on all pages)

Date *12/21/18*

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