



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: January 10, 2012

Mr. John P. Rijos, Co-President
Brookdale Senior Living Communities, Inc
160 Elephant Road
Dublin, Pennsylvania 18917

RE: Clare Bridge of Dublin
160 Elephant Road
Dublin, Pennsylvania 18917

Dear Mr. Rijos

As a result of the Department of Public Welfare's licensing inspection on October 11, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

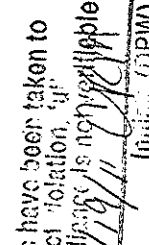
A handwritten signature in black ink that reads "Chevon Miller" followed by a stylized flourish.

Chevon Miller
Regional Licensing Administrator

Enclosure(s)
Violation Report



VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

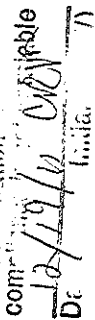
| | | | |
|---|------------------|---|------------------|
| NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF DUBLIN, 160 ELEPHANT ROAD DUBLIN, PA 18917 | | CURRENT LICENSE NUMBER 127350 | |
| INSPECTION DATES (include all dates of the inspection) 10/11/2011 | | REGIONAL REPRESENTATIVE Justin Trupp, Lori Knockstead | |
| PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) | | | |
| SIGNATURE OF LEGAL ENTITY <i>Donniella Fontal</i> | DATE 11/18/11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Miller</i> | DATE 12/19/11 |

| REGULATION 55 Pa.Code §2600 | VIOLATION | DATE BY WHICH CORRECTION WILL BE COMPLETED | PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur) | DATE COMPLIANCE VERIFIED BY |
|---|---|---|---|--|
| 15a The home shall immediately report suspected abuse of a resident served in the home 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) and comply with the requirements regarding restrictions on staff persons. | On 9/11/11, an allegation of abuse against resident #1 was reported to staff person A. The home did not complete and send an Act-13 report to the the area agency on aging. | 11/18/11 | The Act 13 Report was sent to the Area Agency on Aging and DPW on October 15, 2011 and the Health and Wellness Director was verbally reminded of this requirement on that same day. On November 18, 2011 appropriate staffs were formally re-trained on this requirement. Reportable events will be reviewed every other month at the community's Collaborative Care meetings which is attended by the Executive Director, Health and Wellness Director, Resident Care Coordinator, Clare bridge Program Coordinator, Dining Services Coordinator, Maintenance Technician and selected associates. In addition, the Executive Director, Health and Wellness Director or designee will review reportable incidents on a monthly basis to maintain compliance with the applicable requirements. | <p align="center">Steps have been taken to correct violation, if compliance is not verifiable</p> <p align="right">  (M) (DPW) Date 11/18/11 </p> |

11/18/2011 02:16 2152491800 ALTER PAGE 02/05

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

| | | | |
|---|------------------|--|------------------|
| NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF DUBLIN, 160 ELEPHANT ROAD DUBLIN, PA 18917 | | CURRENT LICENSE NUMBER 127350 | |
| INSPECTION DATES (Include all dates of the inspection) 10/11/2011 | | REGIONAL REPRESENTATIVE Justin Trupp, Lori Knockstead | |
| PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) | | | |
| SIGNATURE OF LEGAL ENTITY  | DATE 11/18/11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  | DATE 12/19/11 |

| REGULATION 55 Pa.Code §2600 | VIOLATION | DATE BY WHICH CORRECTION WILL BE COMPLETED | PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur) | DATE COMPLIANCE VERIFIED BY |
|--|---|---|---|--|
| 234d The support plan shall be revised at least annually and as the resident's condition changes. | <p>Resident #2 exhibited aggressive behaviors towards staff as follows:</p> <ul style="list-style-type: none"> 9/3/11 - Resident #2 chased and threatened to punch staff. 9/4/11 - Resident #2 became combative with staff while trying to elope on two occasions. 9/4/11 - Resident #2 punched the cook in the chest. <p>On 9/11/11, resident #2 exhibited physically aggressive behavior towards resident #1. Resident #1 presented with two quarter sized bruises on the right wrist following the incident. Resident #2's support plan dated 9/5/11 has not been updated to address supervision needs pertaining to the resident's onset of aggressive behavior towards other residents.</p> | 11/18/11 | <p>On November 18, 2011 appropriate staff has been retrained on the updated support plans for changes in condition. Resident #2's support plan has been updated to reflect his behavior. The Executive Director, Health and Wellness Director and or designee will monitor compliance by <u>monthly random audits of the support plans.</u></p> | <p>Steps have been taken to correct violation. Compliance verified by  on 11/19/11</p> |