

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to BROOKDALE SENIOR LIVING COMMUNITIES, INC.

To operate CLARE BRIDGE OF MURRYSVILLE

Located at 5300 OLD WILLIAM PENN HIGHWAY, EXPORT, PA 15632

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

The total number of persons which may be cared for at one time may not exceed 42
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 42

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

and shall remain in effect from February 19, 2012 until February 19, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **428680**

Robert E. Robinson

ISSUING OFFICER

R. C. King

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

APR 17 2012

PHONE: (717) 783-3670
FAX: (717) 783-5662

Mr. John P. Rijos, Co-President
Brookdale Senior Living Communities, Inc.
Clare Bridge of Murrysville
5300 Old William Penn Highway
Export, Pennsylvania 15632

Dear Mr. Rijos:

As a result of the Department of Public Welfare's licensing inspection on February 9, 2012 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.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky', with a long horizontal stroke extending to the right.

Ronald Melusky
Director

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinger-Alman	
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>Sharon Hollinger</i>	DATE 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jim J. Perry (JJP)</i>	DATE 3-28-12

REGULATION 55 Pa.Code §2600	VIOLATION		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
<p>82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.</p> <p>101j5 Each resident shall have the following in the bedroom: A bedside table or a shelf.</p>	<p>There was an 18 ounce bottle of Aveeno in Resident #1's bedroom. There was an open bin of laundry detergent in the unlocked laundry room.</p> <p>Both of these items had manufacturer's labels indicating "if ingested contact a physician or poison control center".</p> <p>Residents of the home have not been assessed capable of recognizing and using poisons safely.</p> <p>There is no bedside table or shelf beside the bed of Resident #2</p> <p><i>withdrawn JJP 3-20-12</i></p> <div style="border: 1px solid black; padding: 5px; text-align: center; margin: 10px auto; width: fit-content;"> <p>Western Region</p> <p>MAR 16 2012</p> <p>Adult Residential Licensing</p> </div>	<p>82 C</p>	<p>The bottle of Aveno lotion was removed from the resident's room at time of inspection. The applicable associates will be re-trained on the proper procedure of identifying and reporting of potentially hazardous items in a resident's room by 3.15.12. Additionally, room audits will be conducted weekly by the Resident Care Coordinator or designee for a period of three months starting 3.10.12. The Health and Wellness Director or designee will conduct random audits to maintain compliance.</p> <p>The laundry soap was removed from the laundry room at the time of inspection and is now stored in the locked utility room. The utility room is only accessible via staff key. The Maintenance Technician or designee will conduct daily rounds to verify that the utility room is locked and the laundry soap is stored correctly. The Executive Director or designee will conduct random audits to maintain compliance.</p> <p align="right"><i>see page 1A</i></p>	<p><i>JJP</i> 3-28-12</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA . 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinner-Alman	
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>Sheree Helwig</i>	DATE 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JYP</i>	DATE 3-28-12



REGULATION 55 Pa.Code §2600	VIOLATION	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
101j5 Each resident shall have the following in the bedroom: A bedside table or a shelf.	There is no bedside table or shelf beside the bed of Resident #2	<p align="center"><i>withdrawn JYP 3-28-12</i></p> <p align="center">101 j5</p> <p>We respectfully request that this violation be withdrawn. Since this resident's care plan indicated they were a fall risk, bedside table was moved away from that area for safety. This information was in support plan at the time of survey. Previous surveyors have informed us that as long as information such as this is in the plan of care, this would not be a violation.</p>	

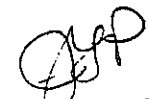
Western Region

MAR 16 2012

Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flimmer-Alman	
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 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-28-12



REGULATION 55 Pa.Code §2600	VIOLATION	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
101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	The bed for Resident #2 does not have a source of light that can be turned on/off from bedside.	101 j7 An alternate source of lighting was placed At the resident's bedside at the time of survey. This information has been added to [redacted] support plan. The Maintenance Technician will monitor on daily rounds to maintain compliance. The Executive Director or designee will conduct random audits to maintain compliance. Associates will be re-trained on the importance of identifying adequate lighting in resident rooms by 3.15.2012.	 3-28-12


Western Region

MAR 16 2012

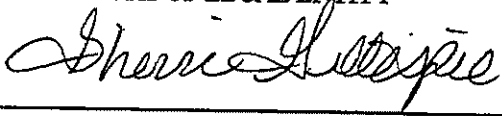
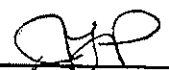
Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinner-Alman	
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 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-28-12

REGULATION 55 Pa.Code §2600	VIOLATION	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
123b Copies of the emergency procedures 107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.	The municipality's emergency procedures are not posted in a conspicuous and public place in the home. <div style="border: 1px solid black; padding: 5px; text-align: center; margin: 10px auto; width: 80%;"> Western Region MAR 16 2012 Adult Residential Licensing </div>	123 b A copy of the municipality's emergency procedure was posted in the residents' library at the time of the survey. The Executive Director or designee will monitor weekly for compliance.	 3-28-12

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinger-Alman	
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 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-28-12

REGULATION 55 Pa.Code §2600	VIOLATION	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
132h Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	<p>Not all of the residents are moved to a fire safe area during fire drills. Only the residents in the area of the simulated fire are evacuated and the other residents remain in their rooms.</p> <p>Repeated Violations: 12/15/2010</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; text-align: center;"> <p>Western Region</p> <p>MAR 16 2012</p> <p>Adult Residential Licensing</p> </div>	<p align="center">132 h</p> <p>We respectfully request this violation be with-drawn based on the following information: On January 10, 2012, Atlantic Code Consultants was in to conduct our annual fire drill and Fire Safety Certification. Please refer to the attached copy of the certification letter and fire protection and life safety sketch. Per Atlantic Code Consultants, Clare Bridge of Murrysville is divided into five separate and distinct fire safe zones by one hour fire rated construction. When fire drills are conducted we evacuate residents out of the mock fire area. Residents not in the area of the mock fire are not evacuated because they are already in a fire safe zone. Therefore, we believe the community is in compliance with this requirement.</p> <p align="right"><i>See page 4A of 7.</i></p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>[Signature]</i> Date: 3/28/12 Initials (DPW)</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Carter, Lisa Ffimer-Alman	
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>Sherie Hillaris</i>	DATE 3-28-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	DATE 3-28-12

REGULATION 55 Pa. Code §2600	VIOLATION	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
132h Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	Not all of the residents are moved to a fire safe area during fire drills. Only the residents in the area of the simulated fire are evacuated and the other residents remain in their rooms. Repeated Violations: 12/15/2010	4/20/2012 - During a fire drill, all residents of the facility will evacuate to a designated meeting place within each fire-safe area. If the simulated fire is within the fire-safe area, residents must evacuate to another fire-safe area in the home or to a designated meeting place away from the building.	

Western Region



MAR 28 2012

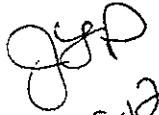
Adult Residential Licensing

No. 2043 P. 2 02/02

Mar. 28. 2012 5:12:10 PM 9412 CLARE BRIDGE MURRYSVILLE

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinner-Alman	
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 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-28-12

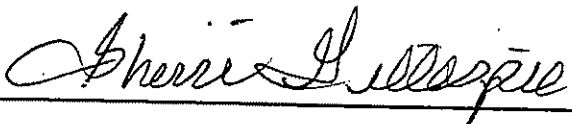
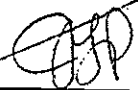
REGULATION 55 Pa.Code §2600	VIOLATION	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
185a The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.	Resident #3 has a prescription for Klonopin 0.5 m.g. 1 tab. T.I.D. PRN; however, this medication was not available.	<p>185 a</p> <p>The medication for this resident was received from the pharmacy on the day of inspection. Appropriate staff will be retrained on the policy for refilling and storage of medication prescriptions.</p> <p>Completion date: 3.15.12</p> <p>A thorough cart audit was completed immediately following survey. Cart audits will be completed weekly by the Resident Care Coordinator or designee. The Health and Wellness Director or designee will conduct random audits to maintain compliance.</p>	 3-28-12

Western Region

MAR 16 2012

Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinner-Alman	
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 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-28-12

REGULATION 55 Pa.Code §2600	VIOLATION	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
<p>187a</p> <p>A medication record shall be kept to include the following for each resident for whom medications are administered:</p> <ul style="list-style-type: none"> (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 	<p>There is not a master key in the medication administration record to identify the initials of the staff who administered medications.</p> <p>Repeated Violations: 12/15/2010</p>	<p align="center">187a</p> <p align="center"><i>3-28-12</i></p> <p align="center"><i>Withdrawn JJP</i></p> <p>We respectfully request this violation be With-drawn due to the following information: Number 14 of regulation 187a states that the name and initials of the staff person administering the medication be present. On the back of each page of every individual MAR there is an area designated for the initials and signatures of our Med-Techs. All Med-Tech initials and signatures were documented in this area at the time of the survey. Under the "Other information" section in 187a, it does not state that a master key for signatures and initials is required.</p>	

Western Region

MAR 16 2012

Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME CLARE BRIDGE OF MURRYSVILLE, 5300 OLD WILLIAM PENN HIGHWAY EXPORT, PA 15632		CURRENT LICENSE NUMBER 428680	
INSPECTION DATES (Include all dates of the inspection) 02/09/2012		REGIONAL REPRESENTATIVE Jan Cutter, Lisa Flinner-Alman	
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>Sherrill Shupp</i>	DATE 3-15-12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

REGULATION 55 Pa.Code §2600	VIOLATION	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
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.	<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p style="font-size: 1.2em; font-weight: bold; margin: 0;">Western Region</p> <p style="margin: 5px 0 0 0;">MAR 16 2012</p> <p style="margin: 0 0 0 0;">Adult Residential Licensing</p> </div>	<p style="font-size: 1.5em; font-weight: bold; margin: 0;">3-25-12</p> <p style="font-size: 2em; font-weight: bold; margin: 0;">Withdrawn</p> <p style="font-size: 2em; font-weight: bold; margin: 0;">JAP</p>	