



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
100 LACKAWANNA AVENUE
ROOM 330, SCRANTON STATE OFFICE BUILDING
SCRANTON, PENNSYLVANIA 18503-1923

ADULT RESIDENTIAL LICENSING

PHONE: (570) 963-3209
1-800-833-5095
FAX: (570) 963-3018

Sent via email to: [REDACTED]
MAILING DATE: May 21, 2012

Ms. Ilse Rubinow, Administrator
Elan Gardens, Inc.
Elan Gardens
465 Venard Road
Clarks Summit, Pennsylvania 18411

Dear Ms. Rubinow:

As a result of the Department of Public Welfare's licensing inspection on April 23, 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.

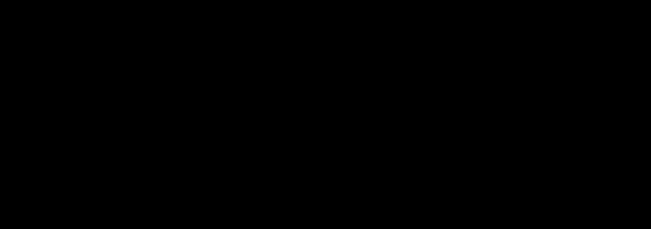
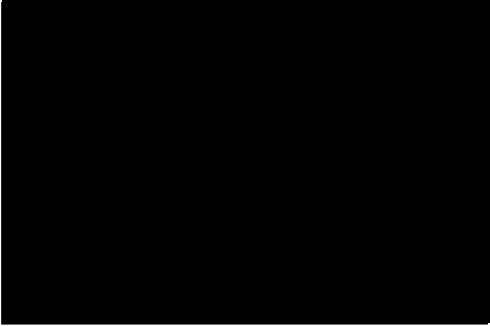
Sincerely,

A handwritten signature in cursive script that reads "Bob Bisignani".

Regional Licensing Administrator

Enclosure
Violation Report

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

PCH Name: ELAN GARDENS		License Number: 243750
Address: 465 VENARD ROAD, CLARKS SUMMIT, PA 18411		County: Lackawanna
Administrator: Ilise Rubinow		Region: NORTH
Legal Entity Name: ELAN GARDENS INC		
Legal Entity Address: 465 VENARD ROAD, CLARKS SUMMIT, PA 18411		
Certificate(s) of Occupancy C-2 LP 10/18/1996 L&I		
Staffing Hours		
Resident Support: NM	Total Daily Staff: 54	Waking Staff: 41
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Complaint		
On-Site Inspections Dates and Department Representatives On-Site		
04/23/2012: Patton, Leslie		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 75 Number of Residents Served: 54 Secured Dementia Care Unit in Home: No Area: 	Number of Residents who: 	

Violation Report: 24375 - 04/23/2012 - Patton, Leslie

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2. DESCRIPTION OF VIOLATION

Resident #1 was prescribed Fentanyl patch 12mcg one patch to be applied every 3 days. On 11/25/10, two patches were discovered on the resident's right shoulder. The home failed to submit a Reportable Incident form to the Department's N.E. Regional office regarding the medication error within 24 hours as required.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

- A Reportable Incident report form has been completed and a copy is attached. Completed 5/7/12 -

- Also attached is the new "Topical Patch Policy" which is now in place. Item 4. on that policy refers to the reporting of any error in the administration of a topical patch. Completed 5/8/12.

- The new Topical Patch Policy is being reviewed with each licensed nurse. Will be completed by 5/17/12.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Therese Robinson, Administrator Date 5/8/12

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

The above plan of correction is approved as of <u>5/21/12</u> (Date)	Verification of Legal Entity Representative Signature <u>5/21/12</u> (Date)
The above plan of correction was approved by <u>GB</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 24375 - 04/23/2012 - Patton, Leslie

1. REGULATION 55 Pa.Code §2600

2600.42(d) - A resident shall be informed of the rules of the home and given 30 days' written notice prior to the effective date of a new home rule.

2. DESCRIPTION OF VIOLATION

On 11/30/10, the home implemented rules that were specific only to resident #1. These rules were not made applicable to all residents of the home nor was the resident given 30-days notice before their implementation.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

It is now understood by the Administrator that rules must be applicable to all residents of the Home. It is also now understood that residents must be given 30-days notice before implementing any new rules. All residents will now have "Home Rules" included in their lease agreements. Current residents received notice of this on May 1, 2011 with their annual rental increase letter. A signed receipt of the same will be put in each Resident Record. (See attached sample letter.) Issuance of letters completed 5/1/12. Receipts placed in files to be completed by 5/3/12.

Repeat Violation: No	Date(s) of Previous Violation(s):
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Signature of Legal Entity Representative (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Elise Robinson	5/8/12

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

The above plan of correction is approved as of	<u>5/21/12</u> (Date)	Verification of Legal Entity Representative Signature	<u>5/21/12</u> (Date)
The above plan of correction was approved by	<u>B.B.</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

by 5/31/12

Violation Report: 24375 - 04/23/2012 - Patton, Leslie

1. REGULATION 55 Pa.Code §2600

2600.187(d) - The home shall follow the directions of the prescriber.

2. DESCRIPTION OF VIOLATION

Resident #1 was prescribed Fentanyl patch 12mcg one patch to be applied every 3 days. On 11/25/10, two patches were discovered on the resident's right shoulder, which is not in compliance with the prescriber's order.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

- A new policy entitled "Topical Patch Policy" has been put into place. This policy addresses the violation as described above as well as any other possible issues. Completed 5/8/12 (see attached)
- The "Topical Patch Policy" will be reviewed with each licensed nurse. Will be completed by 5/14/12.
- An MAR has been developed to be used when Topical Patches are order. (See Attached) Completed 5/8/12

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)



Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Ilse Robinson, Administrator

Date 5/8/12

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

The above plan of correction is approved as of

5/21/12
(Date)

Verification of Legal Entity Representative Signature

5/21/12
(Date)

The above plan of correction was approved by

B.S.
(Initials)

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