



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

OCT 05 2012

Ms. Kristen Mazzaferro, President
Brookside Assisted Living, Inc.
Brookside Senior Living
49 Brookside Lane
Brookville, Pennsylvania 15825

Dear Ms. Mazzaferro:

As a result of the Department of Public Welfare's licensing inspection on August 15, 2012, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 41113 - 08/15/2012 - Rojon, Dennis
PCH Name: BROOKSIDE SENIOR LIVING

SEP 26 2012

1. REGULATION 55 Pa.Code §2600

2600.20(b)(4) - Resident funds and property shall only be used for the resident's benefit
Western Field Office
Residential Licensing

2a. DESCRIPTION OF VIOLATION

On 6/15/12 or 6/16/12 resident #1 gave staff person A \$300.00 for driver's license educational materials. The resident's funds were not reimbursed by the staff person or the home.


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.

See page 2A.

~~Refer to Addendum A~~

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) Tom Guthridge Administrator Date 9.26.12

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

The above plan of correction is approved as of 9-28-12
(Date)

Plan of correction implementation status as of 9-28-12
(Date)

- Fully Implemented 9-28-12
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

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

SEP 26 2012

Addendum A

Western Field Office
Adult Residential Licensing

We do not believe that this situation is a violation for the following reasons:

1. Regulation 2600.20 (a) states "A resident may manage his personal finances unless he has a guardian of his estate." In this particular situation, the resident in question completely manages [redacted] own finances independently with no assistance from Brookside or any other persons or parties.
2. The Regulation cited (2600.20 (b)(4), and all of the 2600.20(b) associated subsections (1-10), applies exclusively to situations when "the home provides assistance with financial management or holds the resident funds...". Again, as previously stated, in this particular situation, the resident in question completely manages [redacted] own finances independently with no assistance from Brookside or any other persons or parties.
3. In summary, we believe that Regulation 2600.20 has two mutually exclusive subsections, (a) and (b). This resident falls into subsection (a) categorization. Because of this, we do not believe that we can be in violation of any part of subsection (b).

However, as a precaution, Administration will review with our staff the following items immediately via MEMO:

1. Regulation 2600.20. Financial Management, as described in the PA Code Chapter 2600 regulation handbook.
2. Brookside Policy regarding Resident Financial Management and Safekeeping of Funds and Property (see attachment #1).
3. Brookside Policy regarding Conflict of Interest (see attachment #2).

As already described in our existing Policies and Procedures, violators of these rules and/or Regulations may be subject to disciplinary action.

9-28-12 - The home documented training of staff, 9-28-12 g

Jan [Signature]

9.26.12

9-28-12 g

Violation Report: 41113 - 08/15/2012 - Rojon, Dennis
PCH Name: BROOKSIDE SENIOR LIVING

Western Field Office
Adult Residential Licensing

1. REGULATION 55 Pa.Code §2600
2600.82(c) - 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.

2a. DESCRIPTION OF VIOLATION

A spray container of Airwick cool linen and lilac fragrance 8- ounce bottle, with a manufacture's label indicating "contact a physician or contact poison control if swallowed", was unlocked and accessible in resident room #44. Residents of the home, including #1, #2 and #3, have not been assessed capable of recognizing and using poisons safely.

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.

See page 3A

~~Refer to Addendum B~~

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Tom Guthridge

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

Tom Guthridge, Administrator

Date 9.26.12

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(Date)

Plan of correction implementation status as of 9-28-12
(Date)

- Fully Implemented 9-28-12
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- Partially Implemented - Inadequate Progress
- Not Implemented

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

RECEIVED

Page 3 A

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Addendum B

Western Field Office
Adult Residential Licensing

1. Any poisonous materials under supervision, use, or possession of Brookside and/or Brookside Staff are kept locked and accessible to facility staff only. This practice has already been in existence and will remain in effect.
2. Residents are not permitted to independently use or possess poisonous materials unless deemed capable by their physician and/or Brookside Administration. If a resident is deemed capable to safely use or possess poisonous materials independently, then Brookside requires that the resident keep the poisonous materials locked in his/her room or secured by Brookside. This information is stipulated in our Resident Home Contract (*see attachment #8*).
3. To help deter future non-compliance with this Regulation, Administration will instruct staff via MEMO to be aware of what is considered poisonous materials and to review the Regulation 2600.82 regarding Poisons and appropriate storage.

9-28-12 - The home documented training of staff 9-28-12g

Jan

~~Jeffrey~~

9.26.12

9-28-12g

Violation Report: 41113 - 08/15/2012 - Rojon, Dennis
PCH Name: BROOKSIDE SENIOR LIVING

SEP 26 2012

1. REGULATION 55 Pa.Code §2600
2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION
The telephone in resident room #44 does not have the numbers for the nearest hospital, local police and fire department, ambulance service; poison control center, the local emergency management number or the personal care complaint hot line posted on or by the telephone.

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.

See page 4A

Refer to Addendum G

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Jan [Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Tom Guthridge, Administrator* Date *9-26-12*

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The above plan of correction is approved as of <u>9-28-12</u> (Date)	Plan of correction implementation status as of <u>9-28-12</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <i>9-28-12</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

RECEIVED

SEP 26 2012

Addendum C₂

Western Field Office
Adult Residential Licensing

1. All current phones within the facility have already been reassessed to ensure that they have telephone # stickers (see sample #1 below) affixed which list all of the required telephone numbers as specified in Regulation 2600.91. This was performed by Administration.
2. To help deter future non-compliance with this Regulation, Brookside will continue to provide telephone # stickers to residents upon admission, and will perform monthly checks to ensure all phones within the facility have the appropriate telephone # sticker affixed.

Note: The violation in question of the telephone in room #44 was corrected and verified on the date of inspection by the Licensing Representative on-site.

Sample #1

Ambulance-Fire-Police	911
Brookville Hospital	849.2312
Emergency Management	849.5052
Poison Control Center	1.412.681.6669
PCH Complaint Hotline	1.877.401.8835

Jam [Signature]

9-26-12
9-28-12g

Violation Report: 41113 - 08/15/2012 - Rojon, Dennis
PCH Name: BROOKSIDE SENIOR LIVING

SEP 26 2012

1. REGULATION 55 Pa.Code §2600
2600.185(a) - 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.

Western Field Office
Adult Protective Licensing

2a. DESCRIPTION OF VIOLATION
Resident #1 is prescribed Nitrostat .4mg 1-tab every 5 min. (max 3 doses) as needed for pain. On 8/15/12 the medication was not available in the home for administration.

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.
See page 5A

Refer to Addendum Dg

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Tom Guthridge*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Tom Guthridge, Administrator* Date *9.26.12*

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The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <i>9-28-12g</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

RECEIVED

SEP 26 2012

Addendum B

Western Field Office
Adult Residential Licensing

1. First and foremost, this specific violation has been resolved as of 8.16.12 by Brookside staff. The Nitrostat in question was filled and delivered by the pharmacy on 8.16.12 and is still currently available in our facility for administration (see attachment #3 for verification).
2. To help deter future non-compliance with this Regulation, Administration will perform the following:
 - a. Re-orient staff via MEMO to existing policy entitled *Procedures for Safe Storage, Access, Security, Distribution and Use of Medications and Medical Equipment* (see attachment #4).
 - b. Diamond Pharmacy will continue to provide quarterly audits to help ensure accuracy/availability of MAR/TAR to meds/treatments and vice versa. Last audit performed by Diamond was 9.26.12 (see attachment #5 for verification).

9-28-12 - 7 1/2 hour documented training of staff. 9-28-12g

Jim [Signature]

9.26.12

9-28-12g

Violation Report: 41113 - 08/15/2012 - Ropon, Dennis
PCH Name: BROOKSIDE SENIOR LIVING

SEP 26 2012

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

Adult Residential Licensing

- (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.

2a. DESCRIPTION OF VIOLATION

Resident #2 is prescribed Codeine sulfate 30mg tab as needed for pain. The medication is not listed on the medication administration record.

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.

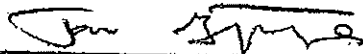
See page 6A

~~Refer to Addendum E~~

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)

TOM GUTHRIE Administrator

Date 9-26-12

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

The above plan of correction is approved as of 9-28-12
(Date)

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

Plan of correction implementation status as of 9-28-12
(Date)

- Fully Implemented 9-28-12
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

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SEP 26 2012

Addendum E-*g*

Western Field Office
Codeine Sulfate

1. First and foremost, this specific violation has been resolved by Brookside staff. The codeine sulfate question was documented on the MAR on 8.15.12 (see attachment #6). As can be seen on attachment #6, the codeine sulfate was then discontinued by his PCP on 8.22.12 and is still currently a discontinued order.
2. To help deter future non-compliance with this Regulation, Administration will perform the following:
 - a. Re-orient staff via MEMO to existing policy entitled *Procedures for Safe Storage, Access, Security, Distribution and Use of Medications and Medical Equipment* (see attachment #4).
 - b. Diamond Pharmacy will continue to provide quarterly audits to help ensure accuracy/availability of MAR/TAR to meds/treatments and vice versa. Last audit performed by Diamond was 9.26.12 (see attachment #5 for verification).

9-28-12 - The home documented training of staff. 9-28-12g

Jan *[Signature]*

9.26.12

9.28.12g

Violation Report: 41113 - 08/15/2012 - Ropon, Dennis
 PCH Name: BROOKSIDE SENIOR LIVING

SEP 26 2012

1. REGULATION 55 Pa.Code §2800
 2600.187(d) - The home shall follow the directions of the prescriber.

Western Field Office
 Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION
 Resident #1 is prescribed Novilin R sliding scale four units for a blood glucose reading of 181 - 220. On 8/1/12 at 7:00 a.m. resident #1's blood glucose reading was 193; however, only two units of Novilin R were administered.

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.
 See page 7A

Refer to Addendum E

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jan Guttridge, Administrator</i>	Date <i>9.26.12</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE

The above plan of correction is approved as of 9-28-12
 (Date)

Plan of correction Implementation status as of 9-28-12
 (Date)

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

- Fully Implemented *9-28-12*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

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Page 7A

SEP 26 2012

Addendum F

Western Field Office
Adult Residential Licensing

1. Upon discovering the medication error in question on 8.15.12, Administration executed the proper reporting protocol as prescribed by Regulation 2600.188. The staff person responsible for the error was addressed by Administration on 8.15.12, being made to review existing Medication Policies and being reminded of the importance of mindfulness when distributing medications. Additionally, a final Reportable Incident was submitted by Administration to DPW Adult Residential Licensing Western Regional Office as prescribed by Regulation 2600.16, on 8.16.12.
2. To help deter future non-compliance with this Regulation violation, Administration will perform the following:
 - a. Re-orient staff via MEMO to existing Policies and Procedures pertaining to Medication Records and following directions of the ordering physicians (*see attachment #7*).

Jan [Signature]

9.26.12

9.29.12 f