

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to BROOKDALE SENIOR LIVING COMMUNITIES INC
LEGAL ENTITY

To operate CLARE BRIDGE OF MURRYSVILLE
NAME OF FACILITY OR AGENCY

Located at 5300 OLD WILLIAM PENN HIGHWAY, EXPORT, PA 15632
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE _____

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE _____

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE _____

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 42
(MAXIMUM CAPACITY)
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
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from February 19, 2013 until February 19, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations

No: 428680

Robert E. Robinson
ISSUING OFFICER

[Signature]
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.

PW628 - 01/11



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

JAN 10 2013

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 (Department) licensing inspection on November 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 Human Services Licensing so that compliance can be verified.

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

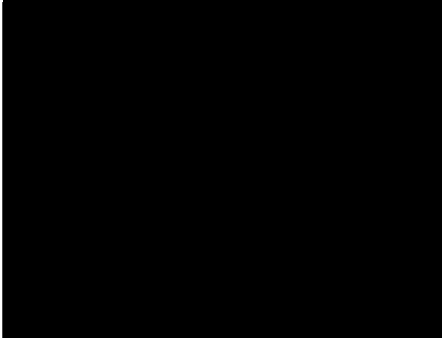
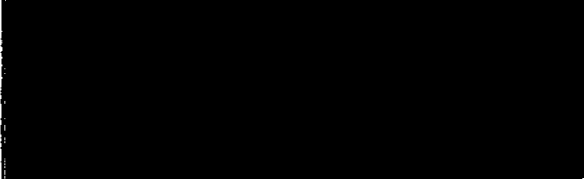
Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky', written over a horizontal line.

Ronald Melusky
Director

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2500

PCH Name: CLARE BRIDGE OF MURRYSVILLE		License Number: 428080
Address: 5300 OLD WILLIAM PENN HIGHWAY, EXPORT, PA 16632		DEC 4 2012 County: Westmoreland
Administrator: Sherri Gillespie		Region: WEST
Legal Entity Name: BROOKDALE SENIOR LIVING COMMUNITIES INC		Western Field Office Adult Residential Licensing
Legal Entity Address: 5300 OLD WILLIAM PENN HIGHWAY, EXPORT, PA 16632		
Certificate(s) of Occupancy C-2 LP 12/09/1997 Labor and Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 72 Waking Staff: 54		
Type of Inspection: Full BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 11/09/2012: Glidden, Michelle; Gearhard, Nancy		
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: 42 Number of Residents Served: 36 Secured Dementia Care Unit in Home: Yes Area: Entire Building Secured Dementia Unit Capacity, if Applicable: 42	Number of Residents who: 	
		

Violation Report: 42888 - 11/09/2012 - Glidden, Michella
 PCH Name: CLARE BRIDGE OF MURRYSVILLE

DEC 4 2012

1. REGULATION 55 Pa.Code §2600

2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Western Field Office
 Adult Protection Licensing

2a. DESCRIPTION OF VIOLATION

There was an undated plastic container of pears in the refrigerator of the main kitchen.
 There was an unlabeled, undated plastic container of bread crumbs on the 3rd shelf in the pantry.
 There was an undated plastic container of yellow rice on the bottom shelf of the pantry.

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.

-Regulation 2600.103(e)

The undated plastic containers of pears, unlabeled/undated container of bread crumbs and undated container of yellow rice in the kitchen were discarded the day of inspection by the Dining Service Manager. Appropriate staff was retrained in labeling and dating of leftover food. Dining Service Manager or designee will perform daily audits of food containers to verify that the containers are dated and labeled correctly. Executive Director or designee will verify ongoing compliance

Completion Date: 11/26/2012

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Sherri Gillespie, RN, ED*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sherri Gillespie* Date *12-4-12*

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

The above plan of correction is approved as of <u>12/5/12</u> (Date)	Plan of correction implementation status as of <u>12/5/12</u> (Date)
The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>MS</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 42868 - 11/09/2012 - Glidden, Michelle
 PCH Name: CLARE BRIDGE OF MURRYSVILLE DEC 4 2012

1. REGULATION 55 Pa.Code §2600
 2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers. Adult (2-8-12) - Pending

2a. DESCRIPTION OF VIOLATION
 At 11:18 AM, the temperature of the second freezer was 10 degrees Fahrenheit. At 3:41 PM, the temperature of this freezer was 10 degrees Fahrenheit.

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.

Regulation 2600.103(f)

The freezer repair company was notified following the inspection. The freezer will not drop below zero as evidenced in the logs. The Dining Services Manager or designee will monitor / log freezer temperatures every 4 hours. Any temperature variances will be noted on the log and maintenance will be contacted. The Executive Director will verify for compliance.

Completion Date: December 3, 2012

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

Signature of Legal Entity Representative (Required on EVERY Page) *Sherrill Gillespie, RN, ED*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Sherrill Gillespie</i>	Date <i>12-4-12</i>
--	---------------------

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

The above plan of correction is approved as of <u>12/5/12</u> (Date)	Plan of correction implementation status as of <u>12/5/12</u> (Date)
The above plan of correction was approved by <u>MS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <i>MS</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 42868 - 11/09/2012 - Gildden, Michelle
 PCH Name: CLARE BRIDGE OF MURRYSVILLE

DEC 4 2012

1. REGULATION 65 Pa.Code §2600
 2600.103(g) - Food shall be stored in closed or sealed containers.

Western Field Office
 Administrator

2a. DESCRIPTION OF VIOLATION

There was an opened, unsealed bag with approximately 10 waffles in the freezer.

There was an uncovered plastic container with heels of white bread in the pantry.

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.

Regulation 2600.103(g)

The opened, unsealed bag of waffles was discarded immediately after inspection. The uncovered plastic container of bread was discarded immediately after inspection. Appropriate staff were retrained in storage of food in closed or sealed containers. Dining Service Manager or designee will perform daily audits of food containers to monitor that the containers are sealed properly. Executive Director or designee will verify for compliance.

Completion Date: 11/26/2012

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

Signature of Legal Entity Representative (Required on EVERY Page) *Sherril Gillespie, RN, ED*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Sherril Gillespie* Date *12-4-12*

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

The above plan of correction is approved as of 12/5/12
 (Date)

Plan of correction implementation status as of 12/5/12
 (Date)

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

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

Violation Report: 42888 - 11/09/2012 - Glidden, Michelle
PCH Name: CLARE BRIDGE OF MURRYSVILLE DEC 4 2012

1. REGULATION 55 Pa.Code §2600
2600.103(i) - Outdated or spoiled food or dented cans may not be used. Western Field Office
Adult Res. - 6000 E. Learning

2a. DESCRIPTION OF VIOLATION
There was an undated bag containing approximately 19 waffles and an unlabeled, undated, aluminum foiled package of hot dogs in the freezer.

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.

Regulation 2600.103(i)

The undated bag of waffles and the unlabeled/undated hot dogs in the freezer were discarded the day of the survey. Appropriate staff were retrained in storage of food in closed or sealed containers which are labeled correctly prior to storing in the freezer. Dining Service Manager or designee will perform daily audits of freezer storage items to verify compliance. Executive Director or designee will verify for compliance.

Completion Date: 11/26/ 2012

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

Signature of Legal Entity Representative (Required on EVERY Page) Sherri Gilispie, RN, ED

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Sherri Gilispie Date 12-4-12

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

The above plan of correction is approved as of 12/5/12 (Date)
The above plan of correction was approved by MS (Initials)
Plan of correction implementation status as of 12/5/12 (Date)
 Fully Implemented MS
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 42888 - 11/09/2012 - Glidden, Michelle
PCH Name: CLARE BRIDGE OF MURRYSVILLE

DEC 4 2012

1. REGULATION 55 Pa.Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

All of the home's monthly fire drill records since October 2011 indicate that not all residents in the home at the time of the drill are evacuated. However, staff indicated all residents, in the home at the time of the fire drill, evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

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.

Regulation 2600.132(c)

When documenting on the fire drill record, the Maintenance Technician or designee will indicate that residents have been evacuated to a fire safe zone. Residents will be prepared to evacuate the building if necessary. The Executive Director or designee will verify compliance.

Completion Date: 11/26/2012

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Sherrri Gillespie, RN, ED

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

Sherrri Gillespie

Date 12-4-12

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

The above plan of correction is approved as of

12/5/12
(Date)

Plan of correction implementation status as of

12/5/12
(Date)

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

The above plan of correction was approved by

MS
(Initials)