



Mailing Date: **JAN 31 2013**

Mr. Eric Mendelsohn, SVP Corporate Development
Emeritus Corporation
Attn: Karen
3131 Elliott Avenue, Suite 500
Seattle, Washington 98121

RE: Emeritus at Latrobe
500 Browers Drive
Latrobe, Pennsylvania 15650

Dear Mr. Mendelsohn:

As a result of the Department of Public Welfare's (Department) licensing inspection on December 10, 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.

Sincerely,

A handwritten signature in black ink that reads "Janine Wenzig". The signature is fluid and cursive.

Janine Wenzig
Regional Licensing Administrator

Enclosure(s)

Violation Report: 42853 - 12/10/2012 - McConnell, Deb
PCH Name: EMERITUS AT LATROBE

JAN 16 2013

1. REGULATION 55 Pa.Code §2600
2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

Resident #1's last medical evaluation was completed on 6/9/11.

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.

2600.141(b)(1) We are disputing this violation.

Resident #1 had a Medical Evaluation completed on December 18, 2010.

Resident #1 was evaluated on June 9, 2011, by Dr. A DME was completed on December 18, 2011, by Dr.

Dr. evaluated Resident #1 on May 4, 2012. Dr. Medical Director for Heartland Hospice completed a DME on December 17, 2012. Also, Dr. Gera completed a DME on January 3, 2013 with an evaluation date of May 4, 2012.

By 5/4/2013 - Resident #1 will have a medical exam by a physician and documented on the form required by the Department, by 2/15/13 the administrator will develop a system to ensure that annual medical exams are

documented on the form required by the Department and signed by the examining physician in a timely manner
1/23/13

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) Executive Director Date 1/15/13

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

The above plan of correction is approved as of 1/23/13 (Date)

Plan of correction implementation status as of 1/23/13 (Date)

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

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

Violation Report: 42853 - 12/10/2012 - McConnell, Deb
PCH Name: EMERITUS AT LATROBE

JAN 16 2013

1. REGULATION 55 Pa.Code §2600

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

The assessment for resident #2, dated 5/9/12, does not address the resident's recent history of multiple falls while in 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.

2600.225(c)

Resident #2 no longer resides at Emeritus at Latrobe. There is no need to update the assessment.

All RASPs (support plan/assessment) for residents in Memory Care will be reviewed by the Memory Care Director and updated as necessary.

Training for Memory Care Director on accuracy with updates on RASPs was conducted on January 14, 2013, by Resident Care Director, [REDACTED] and Executive Director, [REDACTED]

On a monthly basis, all the RASPs that need to be updated will be completed by Memory Care Director and reviewed with the Executive Director for accuracy.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Nancy Woodward

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

Nancy Woodward
Executive Director

Date 1/15/13

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

The above plan of correction is approved as of

1/23/13
(Date)

Plan of correction implementation status as of

1/23/13
(Date)

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

The above plan of correction was approved by

[Signature]
(Initials)

Violation Report: 42853 - 12/10/2012 - McConnell, Deb
 PCH Name: EMERITUS AT LATROBE

JAN 16 2013

1. REGULATION 55 Pa.Code §2600

2600.234(d) - The support plan shall be revised at least annually and as the resident's condition changes.

Western Field Office
 Adult Residential Services

2a. DESCRIPTION OF VIOLATION

The support plan for resident #2, dated 5/9/12, does not address the resident's history of multiple falls while in the home and the resident's use of briefs for incontinence care.

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.

2600.234(d)

Resident #2 no longer resides at Emeritus at Latrobe. There is no need to update the assessment.

All RASPs (support plan/assessment) for residents in Memory Care will be reviewed by the Memory Care Director and updated as necessary

Training for Memory Care Director on accuracy with updates on RASPs was conducted on January 14, 2013, by Resident Care Director, [REDACTED] and Executive Director, [REDACTED]

On a monthly basis, all the RASPs that need to be updated will be completed by Memory Care Director and reviewed with the Executive Director for accuracy.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Nancy Woodward*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Nancy Woodward Executive Director	Date 1/15/13
--	-----------------

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

The above plan of correction is approved as of <u>1/23/13</u> (Date)	Plan of correction implementation status as of <u>1/13</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented