



Mailing Date: February 25, 2013
Sent via email to: [REDACTED]

Ms. Jean Brady, President
Evergreen Elder Care, Inc.
The Villa St. Elizabeth
1201 Museum Road
Reading, Pennsylvania 19611

Dear Ms. Brady:

As a result of the Department of Public Welfare's (Department) licensing inspection on January 10, 2013 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.

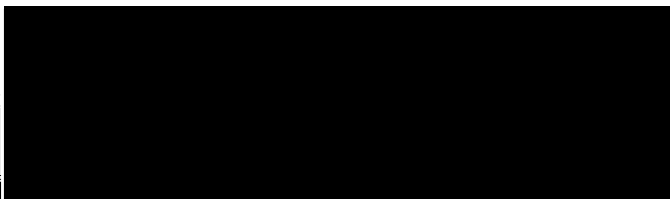
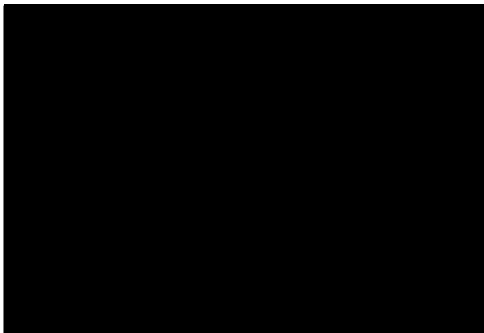
Sincerely,

A handwritten signature in black ink that reads "Michele Moskalczyk".

Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Violation Report

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

PCH Name: THE VILLA ST ELIZABETH		License Number: 205760			
Address: 1201 MUSEUM ROAD, READING, PA 19611		County: Berks			
Administrator: Jean Bready		Region: NORTH			
Legal Entity Name: EVERGREEN ELDER CARE INC					
Legal Entity Address: 1201 MUSEUM ROAD, READING, PA 19611					
Certificate(s) of Occupancy C-1 09/20/1992 L&I					
Staffing Hours <table style="width: 100%;"><tr><td style="width: 33%;">Resident Support: 0</td><td style="width: 33%;">Total Daily Staff: 75</td><td style="width: 33%;">Waking Staff: 56</td></tr></table>			Resident Support: 0	Total Daily Staff: 75	Waking Staff: 56
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<table style="width: 100%;"><tr><td style="width: 33%;">Type of Inspection: Partial</td><td style="width: 33%;">BHA Docket Number:</td><td style="width: 33%;">Notice: Unannounced</td></tr></table>			Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced			
Reason(s) for Inspection(s) Incident					
On-Site Inspections Dates and Department Representatives On-Site 01/10/2013: Novak, Ryan; Bloch, Betty					
Off-Site Inspection Dates and Inspectors, if Applicable 					
Other Details <table style="width: 100%;"><tr><td style="width: 50%;">Partial or Full Triggers:</td><td style="width: 50%;">Random Indicators:</td></tr></table>			Partial or Full Triggers:	Random Indicators:	
Partial or Full Triggers:	Random Indicators:				
Resident Demographic Data as of Inspection Dates					
Licensed Capacity: 92 Number of Residents Served: 75 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 				

Violation Report: 20576 - 01/10/2013 - Novak, Ryan

PCH Name: THE VILLA ST ELIZABETH

1. REGULATION 55 Pa.Code §2600

2600.161(d) - A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION

Resident #1's DME dated 4/24/12 and the assessment dated 05/10/12 notes fluid reotric as a special dietary need prescribed by a physician. Multiple staff interviews indicated the home is not doing anything to monitor Resident #1's fluids. The home is not meeting Resident #1's special dietary needs.

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.

Cited Regulation 55 Pa.Code } 2600.161(d) -

"A resident's special dietary needs as prescribed by a physician, . . . shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record."

Upon the admission of this resident in April 2012, the Administrator questioned the DME's special dietary need entry of "fluid reotric (sp)" for this resident. She referred this to Dr. [REDACTED] who detailed his actions in the attached letter (see Attachment A). At that time, the doctor noted that the "Fluid reotric" was an erroneous and incomplete directive from Dr. [REDACTED] because no specification was made on how much was to be restricted or for how long it was to be restricted. Dr. [REDACTED] goes on to explain that he checked the resident's edema and electrolytes; since, everything was normal, he prescribed Ensure to provide the resident with proper protein nutrition.

Because the doctor issued no other special dietary needs, the facility administered the prescribed Ensure with no other relative action item. Resultantly, the Administrator understood the prescribed dosage of Ensure satisfied the earlier fluid restriction from the DME. This understanding supports the findings of the inspectors' interviews that the staff was not monitoring the resident's fluids.

The facility is committed to the compliance of this regulation, because it truly understands the importance of following the resident's special dietary needs as prescribed by [REDACTED] physician, et.al. The staff understands that these directives must be followed or dire health consequences may result. The cause of this violation citing was administrative only. Once Dr. [REDACTED] contested the DME's directive and prescribed the Ensure, the DME and Assessment was not revised.

- To prevent future incidents like this one related to meeting the special dietary needs of the residents, a complete audit of all residents will be conducted. This audit will encompass the DME, RASP and MAR's. Additionally, a database will be created and maintained to continuously track the special dietary needs of all the residents. The necessary documentation of the staff's efforts and findings will be documented on the prescribed frequency. The Administrator and Medications Administration Manager will be responsible for maintaining compliance of this regulation on an on-going basis.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Jean Bready

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

JEAN BREADY, RN-ADMIN

Date 2-1-2013

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

The above plan of correction is approved as of

2/22/13
(Date)

Plan of correction implementation status as of

2/22/13
(Date)

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

The above plan of correction was approved by

M
(Initials)