



Mailing Date: September 25, 2013

Sent via e-mail 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 May 24, 2013 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) 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,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure

**VIOLATION REPORT
PERSONAL CARE HOMES - 65 Pa.Code Chapter 2600**

PCH Name: THE VILLA ST ELIZABETH		License Number: 20576
Address: 1201 MUSEUM ROAD, READING, PA 19611		County: Berks
Administrator: Jean Brady		Region: NORTHEAST
Legal Entity Name: EVERGREEN ELDER CARE INC		
Legal Entity Address: 1201 MUSEUM ROAD, READING, PA 19611		
Certificate(s) of Occupancy C-1 04/20/1992 Dept. of Labor & Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 73 Waking Staff: 55		
Type of Inspection: Partial		BHA Docket Number: Notice: Unannounced
Reason(s) for inspection(s) Fine		
On-Site Inspections Dates and Department Representatives On-Site 05/24/2013: Rushin, Julienne; Novak, Ryan		
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: 92 Number of Residents Served: 73 Secured Dementia Care Unit in Home: No Area:	Number of Residents who: Receive Supplemental Security Income: 19 Are 60 Years of Age or Older: 71 Have Mental Illness: 31	
Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 1	Have an Intellectual Disability: 3 Have a Mobility Need: 0 Have a Physical Disability: 0	

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Violation Report: 20576 - 05/24/2013 - Rushin, Jufenne
PCH Name: THE VILLA ST ELIZABETH

1. REGULATION 55 Pa.Code §2600

2600.20(b)(3) - The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.

2a. DESCRIPTION OF VIOLATION

Resident # 27's record of financial transactions does not include Resident # 27's signature for deposits or withdrawals. Staff persons A & B are signing the document in lieu of Resident # 27. Nothing is noted on the record that Resident #1 refuses to sign the document.

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

The facility has formally requested technical assistance from the DPW inspection staff and director offices. Throughout the inspection and specifically during the exit meeting on May 24, 2013, the two DPW inspectors stated repeatedly that they were at the facility to only determine compliance to the two regulations, which were cited as potential fines previously - 25c2 and 187b. This proclamation by the inspectors paralleled the logistics explained regarding the "20 day" inspection in the May 8, 2013 letter from Mr. Ronald Melusky, Director - DPW. At the exit meeting both inspectors again re-asserted the fact that they were only at the facility to determine compliance to 25c2 and 187b.

Instead, as can be seen on this page of the violation report, the inspectors cited the facility - with erroneous information and omissions - on regulation 20b3. Please note the above section entitled Description of Violation has been issued with erroneous and/or omitted information:

1. The DPW inspectors have made a reference to RESIDENT #27's record of financial transactions. Please be advised that there is NO Resident #27 listed anywhere in this Violation Report, including the Resident Privacy Coding Document.
2. Again, the DPW inspectors have made the following reference to another Resident #1: "Nothing is noted on the record that Resident #1 refuses to sign the document"? Resident #1 listed on the Resident Privacy Coding Document has never opened a resident fund with the facility.

After receipt of this violation report and with the assistance of our company attorney and the legal department of the DPW, the identity of Resident #27 has been made available to us. There exists no violation against this regulation for the following reasons:

1. The facility is the representative payee for this resident. Per [redacted] ²¹⁴ U.S. District Manager, Social Security Administration, 201 Penn Street, Reading, PA 19601: "The SSA had appointed the facility as the representative payee for this resident. This entrusts the facility with receiving his entire monthly benefits check and responsibly applying the funds to the expenses of the resident - rent, meals, pharmacy bills, etc. As the responsible party, the facility certainly can sign for the resident in cases where he refuses."
2. The resident fund accounting sheets were signed by only the Administrator or Accounting Manager after explaining each transaction AND only after the resident refused to sign. The facility believes this is an important point to show the DPW that these discussions with the resident were conducted by the highest ranked managers of the facility. These managers are adding a note each time that the resident refused to sign.
3. Furthermore, a signed affidavit from Resident #27's Guardian is attached, which certifies that the facility was given previous authorization by him to sign for the resident. The Guardian also underscores his appreciation for the special care the facility has extended to his father, acknowledging his uncooperative nature.

See attached page of 9/23/13

Repeat Violation: Yes Date(s) of Previous Violation(s): 11/07/12

Signature of Legal Entity Representative (Required on EVERY Page) *Jean Bready R.N. Adm. / owner*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jean Bready Adm. / owner* Date *6/28/13*

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

The above plan of correction is approved as of 9-23-13 (Date)

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

Plan of correction implementation status as of 9/23/13 (Date)

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

2A83

9-15-2013 Addendum

- As requested in the attached DPW letter dated 9-13-2013, the following addendum is provided. Adhering to Page 28 of the DPW Licensing Reference Manual (9-1-2013 edition) Can settings dispute a finding on the LIS?, which states: "Settings may document disagreement with a finding, and/or may document that providing a plan does not constitute admission that the listed violation is accurate. However, settings must provide a plan to correct each violation in addition to any statement(s) disputing the report's findings", the facility is complying with the following plan. The facility has disputed the findings on 6-28-2013 (see above). In the spirit of compliance with the LRM, the required plan is submitted below:

1. Regulation 2600.20b3 is important to use receipts to ensure that residents' funds are not misused, and to protect the facility from accusations of misuse of residents' funds.
2. A violation occurs when a facility fails to obtain a written receipt from the resident for cash disbursements at the time of disbursement.
3. The inspectors discovered resident fund receipts that were noted "resident refused to sign" and signed by the Administrator or Accounting Manager.
4. This was fixed right away when the incident was addressed immediately by having the resident's POA provide written authorization that the facility staff was able to sign for the resident when he refuses to sign his receipts.
5. To prevent future occurrences similar to this, the facility accounting department will assist in the following manner:
 - a. If a resident refuses to sign a written receipt for a disbursement, the following steps to resolve the issue will take place:
 - i. The accounting manager and administrator will explain to the resident the benefit of signing the receipts for his withdrawals in order to have a clear accounting of his personal monies from his resident account.
 - ii. The accounting manager will contact the resident's family and/or responsible party, explain the problem and enlist the aid of the family and/or responsible party to meet with the resident to correct the problem.
 - iii. If the resident has no responsible party or if the facility is the resident's representative payee, the accounting manager will notify the local Berks AAA of the problem and request their assistance.
6. The accounting manager is the responsible management person to enforce this policy and continue to supervise the proper processing of the residents accounts, thus preventing future incidents.

Signature of Legal Entity Representative:

Jean Brady

Print Name and Title of Legal Entity Representative:

JEAN BRADY RN
OWNER - ADMIN

Date:

9-20-13

Gene Glasgow 9-23-13

Violation Report 20578 - 05/24/2013 - Rushin, Jufienne
 PCH Name: THE VILLA ST ELIZABETH

1. REGULATION 55 Pa. Code §2600
 2600.25(c)(2) - The contract shall specify a fee schedule that lists the actual amount of allowable resident charges for each of the home's available services

2a. DESCRIPTION OF VIOLATION

A review of records for residents #1 and #15 thru #26 indicated a contract with a fee schedule was signed upon admission. On February 20, 2013, an addendum to the fee schedule was implemented reflecting an increase in rates. Records for residents #1 and #15 thru #26 contained a copy of the new fee schedule however none of the copies were signed and dated by the resident or resident's responsible party to indicate that they were notified of the increase in fees.

Residents #1 and #15 thru #26 were also provided a letter attached to the new fee schedule indicating that they were being given a "30 Day Notice of Resident Requirement for an Application Fee (\$250) and Security Equal to One Month's Rent Revision to Your Resident Contract". Although the letter was dated 2/20/13 and referred to a 30 day notice, a time frame was not indicated as to when the notice would take effect, thus it cannot be clearly determined if in fact a 30 Day Notice has been provided.

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

As of today, June 28, 2013, it is our understanding that this citation against 25c2 has been rescinded per the legal department of the DPW.

*Withdrawn
 J.R.
 8-8-13*

Repeat Violation: Yes	Date(s) of Previous Violation(s):	02/19/2013	11/07/2012
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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)

*Sean Bready R.N. owner / Adm.
 Sean Bready RN Adm / owner Date 6/28/13*

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The above plan of correction is approved as of _____
 (Date)

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

Plan of correction implementation status as of _____
 (Date)

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