



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

OCT 04 2013

Mr. Mark W. Ohlendorf, CFO  
Brookdale Senior Living Communities, Inc.  
Clare Bridge of Dublin  
160 Elephant Road  
Dublin, Pennsylvania 18917

Dear Mr. Ohlendorf:

As a result of the Department of Public Welfare's licensing inspection on August 12, 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.

Your regular license for the period November 8, 2013 to November 8, 2014 was issued on July 30, 2013. Your regular license remains in good standing.

Sincerely,

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

Ronald Melusky  
Director

Enclosure  
License Inspection Summary



Violation Report: 12735 - 08/12/2013 - Kazimer, Lauren  
 PCH Name: CLARE BRIDGE OF DUBLIN

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.

2a. DESCRIPTION OF VIOLATION  
 One slice of cake and one dish of ice cream in the main kitchen's refrigerator were not covered or dated.

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 55PA Code 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.

The slice of cake and dish of ice cream in the main kitchen refrigerator were discarded the day of inspection by the Executive Director. Appropriate staff were retrained in labeling and dating of leftover food. Executive Director or designee will perform daily audits of all food stored to verify they are properly labeled, covered and dated if open. Executive Director or designee will verify ongoing compliance.

Completion Date: September 3, 2013

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

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Daniella Pantal Date 9/10/13

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

The above plan of correction is approved as of 9/10/13  
 (Date)

Plan of correction implementation status as of 9/26/13  
 (Date)

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

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

Violation Report: 12735 - 08/12/2013 - Kazimer, Lauren  
 PCH Name: CLARE BRIDGE OF DUBLIN

1. REGULATION 55 Pa.Code §2600  
 2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION  
 Two bags of pasta in the food storage area were opened and unsealed.

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)**

**Food shall be stored in sealed or closed container**

The two bags of open and unsealed pasta in the food storage area were discarded by the Executive Director on the day of inspection. Appropriate staff were retrained in proper storage of open food items in closed or sealed containers. The Executive Director or designee will perform daily audits of all food stored to verify they are properly sealed. Executive Director or designee will verify ongoing compliance.

Completion Date: September 3, 2013

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Daniella Pantar</i>	Date <i>9/10/13</i>
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The above plan of correction is approved as of <u>9/10/13</u> (Date)	Plan of correction implementation status as of <u>9/26/13</u> (Date)
The above plan of correction was approved by <u>CM</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

1. REGULATION 55 Pa. Code §2600  
2600.107(c) - The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.

2a. DESCRIPTION OF VIOLATION  
On 8/12/2013, the home had 24 residents, but only 55 gallons of emergency drinking water.

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 2600.107.(c)**

**The home shall maintain at least a 3- day supply of non-perishable food and drinking water for residents.**

The additional emergency water supply was ordered and delivered to meet the state requirement for the census of 24. The appropriate staff were retrained on state requirements for emergency water supply availability. The Executive Director or designee will perform weekly audits to verify ongoing compliance.

**Completion Date: August 15, 2013**

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

Signature of Legal Entity Representative  
(Required on EVERY Page) *Daniella Pantal*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) **Daniella Pantal**      Date **9/10/13**

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(Date)

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

Plan of correction implementation status as of 9/20/13  
(Date)

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- Not Implemented

Violation Report: 12735 - 08/12/2013 - Kazlmer, Lauren  
 PCH Name: CLARE BRIDGE OF DUBLIN

1. REGULATION 55 Pa.Code §2600  
 2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION  
 The first aid kit located in the home's van did not include scissors and a breathing shield.

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 2600.171(b)(5)**

***If staff or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in 2600.96.***

A pair of scissors and breathing shield was placed in the first aid kit on the van on August 16, 2013. Staff members scheduled to operate the vehicle were retrained in first aid kit supply management on August 16, 2013. A list of necessary supplies will be kept in the first aid kit and the process for procuring replacement supplies was reviewed. The Clare Bridge Program Coordinator will check the kit weekly. The Executive Director or designee will monitor for compliance.

Completion Date: August 16, 2013

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Daniella Pantal* Date *9/10/13*

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Violation Report: 12735 - 08/12/2013 - Kazimer, Lauren  
PCH Name: CLARE BRIDGE OF DUBLIN

1. REGULATION 55 Pa.Code §2600  
2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

2a. DESCRIPTION OF VIOLATION  
On 8/12/2013, the directions for operating the home's locking mechanism were not posted inside the main entrance door of the SDCU.

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 2600.233.(c)**

*If key-locking devices, electronic card systems, or other devices that prevent immediate egress are used to lock or unlock exits, directions for their operation shall be conspicuously posted near the device.*

A framed picture containing the exit code was posted conspicuously near the locked exit at the main entrance door of the SDCU. Appropriate staff were retrained. The Executive Director or designee will audit weekly to verify ongoing compliance.

Completion Date: August 13, 2013

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

Signature of Legal Entity Representative (Required on EVERY Page) *Daniella Pantaleo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Daniella Pantaleo*      Date *9/10/13*

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