



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

OCT 08 2013

Mr. Sandy Insalaco, Jr., President
Maple Shade Meadows LP
490 North Main Street
Pittston, Pennsylvania 18640

RE: Maple Shade Meadows Senior Living
50 East Locust Street
Nesquehoning, Pennsylvania 18240

Dear Mr. Insalaco:

As a result of the Department of Public Welfare's licensing inspection on September 11, 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 September 29, 2013 to September 29, 2014 was issued on June 21, 2013. Your regular license remains in good standing.

Sincerely,

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

Ronald Melusky
Director

Enclosure
License Inspection Summary

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

PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING		License Number: 20400
Address: 50 EAST LOCUST STREET, NESQUEHONING, PA 18240		County: Carbon
Administrator: MELANIE GOODMAN		Region: NORTHEAST
Legal Entity Name: MAPLE SHADE MEADOWS LP		
Legal Entity Address: 490 NORTH MAIN STREET, PITTSTON, PA 18640		
Certificate(s) of Occupancy		
C-2 LP 07/12/1999 PA L&I	C-2 LP 06/14/2004 PA L&I	C-2 LP 04/20/2004 PA L&I
Staffing Hours		
Resident Support: 0	Total Daily Staff: 91	Waking Staff: 68
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
09/11/2013: O'Haire, Anne; 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: 104	Number of Residents who:	
Number of Residents Served: 89	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 89	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, If applicable:	Have a Mobility Need: 2	
Number of Current Hospice Residents: 1	Have a Physical Disability: 1	
Number of Hospice Residents in past year: 1		

Violation Report: 20400 - 09/11/2013 - O'Haire, Anne
 PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.125(b) - Combustible materials shall be inaccessible to residents.

2a. DESCRIPTION OF VIOLATION
 The home's temporary designated smoking area had numerous combustible items. The furniture was wicker with fiber filled stuffed seat cushions were not fire resistant.

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.

The permanent designated smoking area was moved temporarily on 9/11/13 to covered patio area outside Bistro due to repaving of sidewalks in courtyard. A fire extinguisher was in place. The temporary smoking area was found to have resin furniture with padded seat cushions. The furniture was immediately removed and replaced with fire safe furniture. Smoking area will be closely monitored by administrator, maintenance, and staff to ensure future compliance. Fire safety was reviewed with staff.

Please see attached picture.

9/24/13. Temporary smoking area was returned to designated smoking area.

Melanie Bloomer Administrator

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) Date
 Sandy Insalaco, Jr. - Partner President 9/23/13

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

The above plan of correction is approved as of 9/30/13 (Date)

Plan of correction implementation status as of 9/30/13 (Date)

The above plan of correction was approved by (Initials)

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

Violation Report: 20400 - 09/11/2013 - O'Haire, Anne
 PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
 The home has conducted the following sleeping hour fire drills:
 7/30/12 at 4:15am
 2/28/13 at 6:00am
 The home is not conducting the sleeping hour fire drills every 6 months

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.

*The home was found to have not conducted a sleeping hour fire drill within a six month period. The home will implement monthly unannounced fire drills on an alternating shift schedule of 11-7 shift / 3-11 shift / 7-3 shift on different days of week and varying times of the month. Administrator will closely work with maintenance director and monitor fire drill logs to ensure future compliance.
 Please see attached document.*

Kelaine Hoodman Administrator

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Sandy Insalaco, Jr. Partner</i>	Date <i>9/23/13</i>
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The above plan of correction is approved as of <u>9/30/13</u> (Date)	Plan of correction implementation status as of <u>9/30/13</u> (Date)
The above plan of correction was approved by <u>M</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 20400 - 09/11/2013 - OHaire, Anne
 PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

The home has conducted the following sleeping hour fire drills:

7/30/12 at 4:15 am 6 staff people participated

2/28/13 at 6:00 am 9 staff people participated

The home is conducting drills when more staff people are available to participate. Ancillary staff person A who conducts the fire drills reported that he is not confident the staff working third shift will be able to evacuate the residents by themselves. The home has 3 staff person's that work the 11 pm-7 am shift.

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.

Fire drill log indicated fire drills were being held during night time hours when more staff were available to participate. A fire drill was conducted on 9/19/13 at 11:20 PM when 3 staff members were on shift. Evacuation of designated fire are was completed within allotted time frame. Administrator will closely monitor fire drills as to ensure future compliance.

Fire Marshall was contacted and request for site re-visit to re-evaluate and review training of fire drills and evacuation procedures.

Documentation will be forward when complete.

The Fire Marshall is scheduled for Monday 10/14/13.

Please see attachment.

Melanie Woodman Administrator

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

Signature of Legal Entity Representative (Required on EVERY Page) *Sandy Insalaco*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Sandy Insalaco, Jr. Partner* President Date *9/23/13*

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Violation Report: 20400 - 09/11/2013 - OHaire, Anne
 PCH Name: MAPLE SHADE MEADOWS SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION
 Resident #1's PRN Acetaminophen and Milk of Magnesium were not available at the time of the inspection.

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.

During medication review of Resident #1, two PRN medications (Tylenol and mom) were not found in medication cart which were listed on the MAR, Pharmacy was contacted immediately, MD order resent and medications requested. Medications were delivered same day and placed in medication cart. All nursing staff and medication techs have been re-instructed on medication administration policies and procedures and the importance of checking all medications with MAR and MD orders. Don and Administrator will conduct weekly audits of MARs, MD orders, and medication carts to ensure future compliance. Please see attached documentation.

Believee Goodwin Administrator

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Sandy Insalaco Jr.*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sandy Insalaco, Jr. President* Date *9/23/13*

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 (Date)

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