



JAN 28 2014

Ms. Kori C. Bingaman, Administrator
Brookline at Mifflintown, Inc.
8796 Route 219, P.O. Box 240
Brockway, Pennsylvania 15824

RE: Brookline Retirement Village
92 Village Drive
Mifflintown, Pennsylvania 17059
License #: 302270

Dear Ms. Bingaman:

As a result of the Department of Public Welfare's licensing inspection on October 31, 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 must be maintained.

Your regular license for the period November 23, 2013 to November 23, 2014 was issued on August 9, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones". The signature is stylized and includes a long horizontal flourish extending to the right.

Matthew J. Jones
Acting Director

Enclosure
License Inspection Summary

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

PCH Name: BROOKLINE RETIREMENT VILLAGE		License Number: 302270
Address: 92 VILLAGE DRIVE, MIFFLINTOWN, PA 17059		County: Juniata
Administrator: Debbie Light		Region: CENTRAL
Legal Entity Name: BROOKLINE AT MIFFLINTOWN INC		
Legal Entity Address: 8796 ROUTE 219 PO BOX 240, BROCKWAY, PA 15824		
Certificate(s) of Occupancy C-2 LP 05/06/1979 Labor and Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 26 Waking Staff: 20		
Type of Inspection: Full BHA Docket Number:		Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 10/31/2013: Gensil, Lori; Riel, Becky		
Off-Site Inspection Dates and Inspectors, if Applicable		<p>RECEIVED</p> <p>DEC 17 2013</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 28 Number of Residents Served: 24 Secured Dementia Care Unit in Home: No Area: 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: 3	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 24 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 2 Have a Physical Disability: 0	

Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

Resident #1, admission date 6/5/13, did not sign his/her contract dated 6/5/13.
 Resident #2, admission date 4/3/13, did not sign his/her contract dated 4/3/13.

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.

- Step 1: All resident contracts were checked by the Administrator and are signed by the resident. 11-1-13
- Step 2: All new residents during the admission process will sign their contract. 11-1-13
- Step 3: Administrator will add to Quality Management to monitor monthly new admissions. 11-1-13
- Step 4: Administrator will review all new contracts after signing with the Business Office manager for signatures. 11-1-13

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative

(Required on EVERY Page) *Deborah A. Light*

Printed Name and Title of Legal Entity Representative

(Required on EVERY Page) Deborah A. Light LPN/PCHA

Date 12-16-2013

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

The above plan of correction is approved as of 12-17-13
 (Date)

Plan of correction implementation status as of 12-17-13
 (Date)

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

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

Violation Report: 30227 - 10/31/2013 - Gensit, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.63(a) - At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.

2a. DESCRIPTION OF VIOLATION
 On 10/24/13, from 10:30 pm to 6:30 am, 10/25/13, from 2:30 pm to 10:30 pm and 10/29/13, from 6:30 am to 2:30 pm, no staff members were present in the home who were trained in first aid.

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.

Step 1: On November 1, 2013 two employees attended First Aid training to complete their certification (see attached) 11-1-13

Step 2: Administrator will schedule at least one staff member every shift that is CPR/First Aid certified. 11-1-13

Step 3: Eleven of thirteen employees at Brookline Retirement Village including Dietary are trained + certified in CPR/First Aid Obstructive Airway 12-4-13

Step 4: Administrator will at the time of new hires offer First Aid/CPR training and certification every 3 months by a certified instructor - 11-1-13.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah A. Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light LPN/PCHA* Date *12-16-13*

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.66(b) - The plan must include training aimed at improving the knowledge and skills of the home's direct care staff persons in carrying out their job responsibilities. The staff training plan must include the following:
 (1) The name, position and duties of each direct care staff person.
 (2) The required training courses for each staff person.
 (3) The dates, times and locations of the scheduled training for each staff person for the upcoming year.

2a. DESCRIPTION OF VIOLATION
 The home's 2013 staff training plan does not include anticipated dates, the amount of time needed to complete training or the location of the training sessions.

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.

Step 1: The Administrator completed 2013 staff training plans to include Staffname, date amount of time to complete training, location and Instructor 11-1-13

Step 2: The administrator completed 2014 staff training plan - Using Department form (attached) 12-1-13,

Step 3: Administrator will review training plan each month with Executive Director to make sure completed 12-1-13

Step 4: Administrator will review monthly at Quality Management for year 2014 12-1-13

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light LAN/PCHA* Date *12-16-13*

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION
 The water temperature in the women's bathroom across from the private dining room measured 125.2 degrees Fahrenheit.

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.

Step 1: Staff turned Hot Water thermostat down in the Mechanical Room. 10-31-13

Step 2: Maint. Staff checking and documenting six different areas in the building then rotate back to Zone 1, Zone 2 and Zone 3. (Attachment of temperature checks) 12-1-13

Step 3: Administrator and maint. will review temperatures to assure no reoccurrence. Monthly Quality Management 12-1-13

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Deborah A Light LPA/PCHA Date 12-16-13

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa. Code §2600
 2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION
 The fire drill record does not include an exact amount of time to evacuate in minutes and seconds. Nine of the last eleven fire drills were rounded to the nearest minute.

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.

Step 1: Fire drills are done monthly. They are timed by the Administrator and written on the fire drill log. 11-14-13

Step 2: The fire drill log will reflect the exact amount of time to evacuate the residents in minutes and seconds 10-31-13

Step 3: The fire safety expert has determined 5 minutes 30 seconds as a safe evacuation time. 11-1-13.
 (See attached)

Step 4: The Administrator will review with the Executive Director monthly as part of Quality Management for one year 12-1-13,

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah A. Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Deborah A. Light LPA/PCHA* Date *12-1-13*

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION

The home did not evacuate 1 resident, who was receiving hospice services, during the 10/30/13 3:45 pm fire drill. The home did not implement procedures for this resident required under Ch. 2600.29, the Statement of Policy for hospice care and services.

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.

- Step 1: Statement of Policy for resident under Hospice Care was obtained immediately from physician + her family, 10-31-13
- Step 2: When a resident is receiving Hospice Services, the Administrator will obtain Statement of Policy from the physician indicating that the resident is actively dying and may suffer bodily injury or a hastened death as a result of participation in a fire drill as a result of also a written consent from the resident, resident's power of attorney for health care, the resident's legal guardian or health care representative that the person is not to evacuate in a fire drill 11-1-13.
- Step 3: Administrator and Staff re-educated for Hospice Care and reviewed Statement of Policy 11-1-13
- Step 4: Administrator will inform Executive Director when resident on Hospice Services 11-1-13
- Step 5: All residents, including individuals on hospice, except for those who are in stages of Actively dying, will be evacuated during every fire drill that the home conducts. -28

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Deborah A. Light

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

Deborah A. Light LPN/RNA

Date

12-16-13

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.190(a) - A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION
 Direct care staff members A, B, C and D have not successfully completed the Department-approved annual medications administration required MAR reviews and observations within the last year. All four staff members administered medications to residents at 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.

Step 1: Direct Care Staff A + B, have completed the Department approved medication administration course that includes passing of the Department's performance based competency test. Staff member C is currently on family medical leave and will be recertified on return. 11-1-13.

Step 2: The administrator will make sure correct forms as per Department approval are used 11-1-13

Step 3: Administrator + staff re-educated on MAR reviews and medication observations 11-1-13

Step 4: The administrator will review quarterly with the executive director MAR review/observation medication recertification through Quality Management for one year 11-1-13

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Deborah A Light LPA/PAHA* Date *12-16-13*

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Violation Report: 30227 - 10/31/2013 - Gensil, Lori
 PCH Name: BROOKLINE RETIREMENT VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.190(b) - A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

2a. DESCRIPTION OF VIOLATION

Direct care staff member D did not complete a Department-approved diabetes patient education program within the past 12 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.

Step 1: Staff member D was enrolled in Diabetic Training by the Administrator for Diabetic Update. 11-11-13

Step 2: All staff that administer medications are current with diabetic training from a Certified Diabetic Instructor. 11-1-13

Step 3: Administrator will make sure all employees involved in medication administration will attend Department approved Diabetic Patient Education Program within 12 month period. 11-1-13

Step 4: Documentation of training will be kept by the home. -GE

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Deborah A. Light

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

Deborah A. Light LPA/RHA

Date 12-16-13

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Plan of correction implementation status as of 12-12-13
 (Date)

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 (Initials)

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