



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: May 13, 2014

Ms. Pansey Clarke, President
Accolades Senior Care
123 Meeting House Lane
Cherry Hill, New Jersey 08002

RE: Accolades Senior Care
246 Melrose Avenue
East Lansdowne, Pennsylvania 19050

Dear Ms. Clarke:

As a result of the Department of Public Welfare's (Department) licensing inspection on February 26, 2014 and February 27, 2014 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. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.

Sincerely,

Roslyn Brewer
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

| | | |
|---|---|-----------------------|
| PCH Name: ACCOLADES SENIOR CARE | | License Number: 13571 |
| Address: 246 MELROSE AVENUE, EAST LANSDOWNE, PA 19050 | | County: Delaware |
| Administrator: Pansy Clarke | | Region: SOUTHEAST |
| Legal Entity Name: ACCOLADES SENIOR CARE LLC | | |
| Legal Entity Address: 123 MEETING HOUSE LANE, CHERRY HILL, NJ 8002 | | |
| Certificate(s) of Occupancy | | |
| Staffing Hours | | |
| Resident Support: | Total Daily Staff: 43 | Waking Staff: 32 |
| Type of Inspection: Partial | BHA Docket Number: | Notice: Unannounced |
| Reason(s) for Inspection(s) | | |
| Complaint | | |
| On-Site Inspections Dates and Department Representatives On-Site | | |
| 02/27/2014: Adams, Patricia | | |
| Off-Site Inspection Dates and Inspectors, if Applicable | | |
| 02/26/2014: Adams, Patricia | | |
| Other Details | | |
| Partial or Full Triggers: | Random Indicators: | |
| Resident Demographic Data as of Inspection Dates | | |
| Licensed Capacity: 45 Number of Residents Served: 42 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: 0 Number of Hospice Residents In past year: 0 | Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 18 Have Mental Illness: 37 Have an Intellectual Disability: 1 Have a Mobility Need: 1 Have a Physical Disability: 2 | |

| | | |
|---|-----------------------|---|
| PCH Name: ACCOLADES SENIOR CARE | | License Number: 135710 |
| Address: 246 MELROSE AVENUE, EAST LANSDOWNE, PA 19050 | | County: Delaware |
| Administrator: Pansy Clarke | | Region: SOUTHEAST |
| Legal Entity Name: ACCOLADES SENIOR CARE LLC | | |
| Legal Entity Address: 123 MEETING HOUSE LANE, CHERRY HILL, NJ 8002 | | |
| Certificate(s) of Occupancy | | |
| Staffing Hours | | |
| Resident Support: | Total Daily Staff: 43 | Waking Staff: 32 |
| Type of Inspection: Partial | BHA Docket Number: | Notice: Unannounced |
| Reason(s) for Inspection(s) | | |
| Complaint | | |
| On-Site Inspections Dates and Department Representatives On-Site | | |
| 02/27/2014: Adams, Patricia | | |
| Off-Site Inspection Dates and Inspectors, if Applicable | | |
| 02/26/2014: Adams, Patricia | | |
| Other Details | | |
| Partial or Full Triggers: | | Random Indicators: |
| Resident Demographic Data as of Inspection Dates | | |
| Licensed Capacity: 45 Number of Residents Served: 42 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: 0 Number of Hospice Residents in past year: 0 | | Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 18 Have Mental Illness: 37 Have an Intellectual Disability: 1 Have a Mobility Need: 1 Have a Physical Disability: 2 |

Violation Report: 13571 - 02/26/2014 - Adams, Patricia

PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 2/22/14, an incident occurred requiring the implementation of the home's evacuation procedures. The home did not submit an incident report to the Department and nor did they report the incident by telephone.

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.

Re: Violation Report 13571 02/26/2014

PCH Name: Accolades Senior Care

1. Regulation 55 Pa 2600:

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law)

2a. Description of Violation: On 2/22/14, an incident occurred requiring the implementation of the home's evacuation procedures. The home did not submit an incident report to the Department and nor did they report to the Department and nor did they report the incident by telephone.

3. Plan of Correction (POC): On the above mentioned date an incident report was sent. In the future we will call using 610-270-1137 to inform someone of the incident(s) and to confirm that the incident report was received.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

06/19/2013

Signature of Legal Entity Representative
 (Required on EVERY Page)

Pansy Clarke

Administrator

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

Pansy Clarke

Date

4/16/14

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

The above plan of correction is approved as of

3/8/14
 (Date)

Plan of correction implementation status as of

3/8/14
 (Date)

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

The above plan of correction was approved by

[Signature]
 (Initials)

Violation Report: 13571 - 02/26/2014 - Adams, Patricia

PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600

2600.107(b) - The home shall have written emergency procedures that include the following:

- (1) Contact information for each resident's designated person.
- (2) The home's plan to provide the emergency medical information for each resident that ensures confidentiality.
- (3) Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.
- (4) Means of transportation in the event that relocation is required.
- (5) Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.
- (6) Alternate means of meeting resident needs in the event of a utility outage.

2a. DESCRIPTION OF VIOLATION

On 2/22/14, the home did not follow the following written emergency procedures:

- Pull the fire alarm.
- Head count of all residents.
- No one is to return to the building until the Fire Marshall had given the all clear.
- Inform Fire Marshall that resident in room #2 refuses to leave the building.

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 55 Pa 2600:107(b) The home shall have written emergency procedures that include the following :

- (1) Contact information for each resident's designated person
- (2) The home's plan to provide the emergency medical information for each resident that ensures confidentiality.
- (3) Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of resident's
- (4) Means of transportation in the event that relocation is required.
- (5) Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities of staff persons during shall specific to each resident's emergency needs.
- (6) Alternate means of meeting resident needs in the event of a utility outage.

Description of Violation: Plan of Correction (POC): Emergency Meeting was held on 2/24/2014 related to incident that occurred on 2/20/2014 at this meeting the emergency procedures and fire policy was re-educated to staff. The emergency book was also reviewed with staff and a step by step help sheet was added to emergency book to assist each staff person on what to do in case of emergency.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Patsy Clarke Administrator

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

Patsy Clarke

Date *4/16/14*

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The above plan of correction is approved as of *5/8/14*
(Date)

Plan of correction implementation status as of *5/8/14*
(Date)

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

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

Violation Report: 13571 - 02/26/2014 - Adams, Patricia
 PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600
 2600.107(d) - The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

2a. DESCRIPTION OF VIOLATION
 The home's written emergency procedures have not been submitted to the municipal emergency management agency.

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.

Re: Violation Report 13571 02/26/2014
 PCH Name: Accolades Senior Care

1. Regulation 55 Pa 2600
 2600.107(d) the home's written emergency procedures have not been submitted to the municipal emergency management agency

2a. Description of Violation
 The home's written emergency procedures have not been submitted to the municipal emergency management agency.

3. Plan of Correction (POC): The above referenced violation has been corrected as of 2/28/2014 and the East Lansdowne Fire Department has received information on residents that may need assistance and or reluctant to evacuate in case of an emergency. We will continue to inform our local fire department in writing of changes in resident's condition that could interfere with their ability to evacuate in an emergency situation as often as the changes occur as well as on an annual basis.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Betsy Clarke* Administrator

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Betsy Clarke* Date *4/16/14*

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The above plan of correction is approved as of *5/8/14* (Date)

Plan of correction implementation status as of *5/8/14* (Date)

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

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

Violation Report: 13571 - 02/26/2014 - Adams, Patricia
 PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600
 2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home's emergency procedures are not posted in a conspicuous and public place in 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.

Regulation 55 Pa 2600: 2600.123 Copies of the emergency procedures as specified in 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

Description of Violation: The home's emergency procedures are not posted in a conspicuous and public place in the home.

Plan of Correction (POC) The home emergency book is now posted in a conspicuous and public place in the home. The delegated fire marshal will do bi weekly checks to ensure that the emergency procedure remain in place.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Pansy Clarke Administrator

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

Pansy Clarke

Date *4-16-14*

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The above plan of correction is approved as of

5/8/14
 (Date)

Plan of correction implementation status as of

5/8/14
 (Date)

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

The above plan of correction was approved by

[Signature]
 (Initials)

Violation Report: 13571 - 02/28/2014 - Adams, Patricia
 PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600
 2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home has not notified the local fire department in writing of the location of resident bedrooms or the assistance needed in an evacuation.

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 55 Pa 2600: The home shall notify the local fire department in writing of the address of the home location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

Description of Violation: The home's written emergency procedures have not been submitted to the municipal management agency.

Plan of Correction (POC): The above referenced violation has been corrected as of 2/28/2014 and the East Lansdowne Fire Department has received information on residents that may need assistance and/or reluctant to evacuate in case of an emergency. We will continue to inform our local fire department in writing of changes in resident's condition that could interfere with their ability to evacuate in an emergency situation as often as the changes occur as well as on an annual basis.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Pansy Clarke Administration

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

Pansy Clarke

Date

4/16/14

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3/8/14
 (Date)

Plan of correction implementation status as of

3/8/14
 (Date)

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- Not Implemented

The above plan of correction was approved by

[Signature]
 (Initials)

Violation Report: 13571 - 02/26/2014 - Adams, Patriola
 PCH Name: ACCOLADES SENIOR CARE

1. REGULATION 55 Pa.Code §2600
 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION
 An incident occurred on 2/22/14 requiring the evacuation of the home's residents to a public thoroughfare or fire safe area. The home did not evacuate all of the residents.

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 55 Pa 2600: 2600.132 Residents shall be evacuate the entire building to a public thoroughfare, or to a fire safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

Description of Violation: An incident occurred on 2/22/14 requiring the evacuation of the home's residents to a public thoroughfare or fire safe area. The home did not evacuate all of the residents.

Plan of Correction (POC): Staff was re-educated on the emergency procedures for evacuation. A written step by step of what to do in an emergency situation was added to the emergency book. We have delegated an in house fire marshal and evacuation signs and exit signs has been posted on all floors furthermore all new residents have been educated on emergency evacuation and fire drill procedures. We will continue to educate our staff on emergency preparedness and evacuation procedures annually.

The administrator will ensure this procedure is completed annually AB

Repeat Violation: Yes Date(s) of Previous Violation(s): 08/19/2013

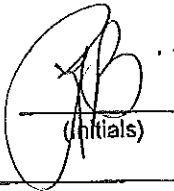
Signature of Legal Entity Representative (Required on EVERY Page) *Pansy Clarke Administrator*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Pansy Clarke* Date *4/16/14*

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

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

Plan of correction implementation status as of _____ (Date)

The above plan of correction was approved by  (Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented