



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: June 30, 2015

Ms. Melanie Werdel, Executive Vice President
Emeritus Corporation
3131 Elliott Avenue, Suite 500
Seattle, Washington 98121

RE: Emeritus at Creekview
1100 Grandon Way
Mechanicsburg, Pennsylvania 17055
Certificate #: 316120

Dear Ms. Werdel:

As a result of the Department of Human Services' licensing inspections on November 19, 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.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 31612 - 11/19/2014 - McCloskey, Jason
 PCH Name: EMERITUS AT CREEKVIEW

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
 The directions for operating the home's locking mechanism are not conspicuously posted near the SDCU doors:
 - next to room #230
 - exit door "B2" across from room #309
 - exit door from the courtyard to the parking lot / dumpster area

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.

See attached Page 2A + 2B of 2:ge

Repeat Violation: No	Date(s) of Previous Violation(s):		
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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)	Date
<i>Soldan M. Granahan, Executive Dir.</i>	<i>3/18/2015</i>

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

The above plan of correction is approved as of <u>6-30-15</u> (Date)	Plan of correction implementation status as of <u>6-30-15</u> (Date)
The above plan of correction was approved by <u>ge</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

Emeritus at Creekview

Plan of Correction

JE

The following is the Plan of Correction for Emeritus at Creekview regarding the Statement of Deficiency dated February 17, 2015 for the incident follow-up survey November 19, 2014. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.

Regulation 2600.182 (c)

The directions for operating the home's locking mechanism are not conspicuously posted near the device.

- **Next to room #230**
- **Exit door B2 across from room #390**
- **Exit door from the courtyard to the parking lot/dumpster area**

Immediately – The sign for the code was located and posted next to room #230, exit door B2 and the exit door from the courtyard with permanent fasteners.

Immediately-Executive Director met with Health and Wellness Director, Memory Care Director and Maintenance Director to verify that any posting in the Memory Care Unit (MCU) is permanently affixed December 31, 2015^u

[Signature], Executive Director 3/18/2015

- Executive Director will complete a walkthrough of the MCU to verify compliance with the POC.

BE

January 31, 2015 and ongoing - Maintenance staff will add code posting checks to their monthly door checks.

Evidence- photos of postings near identified areas

Completion Date- March 20, 2015

Deborah L. Executive Director - 3/18/2015