



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

JUL 07 2016

Mr. John F. Bulman, LCSW, VP, COO  
Salisbury Behavioral Health, Inc.  
300 Welsh Road, Building 4, Suite 100  
Horsham, Pennsylvania 19044

RE: Salisbury Behavioral Health 2  
2538 Gypsy Lane  
Cheltenham Township, Pennsylvania 19001  
License #: 128340

Dear Mr. Bulman:

As a result of the Department of Human Services' annual licensing inspection on April 28, 2016 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 black ink that reads "Jay Bausch".

Jay Bausch  
Deputy Secretary

Enclosure  
License Inspection Summary



Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
 2600.87 - The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.

2a. DESCRIPTION OF VIOLATION  
 One of the track lights in the secondary common area, had a burnt out bulb causing inadequate lighting in that 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.

The personal care home will have adequate lighting in all areas of the home. The maintenance department changed all the bulbs with LED light bulbs, on 4/29/16. Residential Advisors will conduct safety inspection twice a month to ensure adequate lighting is provided. Program Director will ensure safety inspections are implemented. The Program Director has reviewed violation with residential advisors.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *ELO amy/16*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *ELO Demersalok Oper. Dir.* Date *5-17-16*

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

The above plan of correction is approved as of <i>5/23/16</i> (Date)	Plan of correction implementation status as of <i>5/23/16</i> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION  
 - The kitchen sink has several chips in the enamel. Further chipping or deterioration presents a health hazard for the residents.  
 - The wiring, along the right side of the front door, is not secured to the wall.

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.

All furniture and equipment will be clean and free of hazards for all residents. The maintenance department replace kitchen sink by May 31, 2016. Residential advisors will conduct safety inspection twice a month to ensure furniture and equipment is in good repair. Program Director will review regulation and violation with Residential Advisors.

The wiring around the home will be secured.

The maintenance department secured the wiring to the wall at time of inspection on 4/28/16. Residential Advisors will conduct safety inspection twice a month to ensure wiring is secured. The Program Director has reviewed the regulation and violation with Residential Advisor.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Ed Domeralak OPER DIR* Date *5-17-16*

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 (Date)

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 (Date)

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 (Initials)

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

Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
 2600.103(b) - Kitchen surfaces must be of a nonporous material and cleaned and sanitized after each meal.

2a. DESCRIPTION OF VIOLATION  
 - The kitchen counter, where food is prepared, has a half inch wooden strip border along three edges.  
 - The kitchen refrigerator is stained with food and dirt and needs cleaning.

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 kitchen counter will be free of nonporous material. Maintenance department will replace kitchen counters by 5/31/16. Kitchen counters will be free of nonporous material, cleaned and sanitized daily by residential advisers.

The kitchen refrigerator will be free of stains from food and dirt. Residential advisor removed the stain on refrigerator at the time of inspection on 4/28/16. Residential Advisor will check refrigerator daily for cleanliness. Program Director reviewed regulation and violation with residential advisers.

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

Signature of Legal Entity Representative (Required on EVERY Page) *ECD omg/16*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *ECD Director*      Date *5-17-16*

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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

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  
 - A pitcher of unlabeled liquid was found in the refrigerator.  
 - In the freezer, an open bag of Farmers Fries were not labeled with date of opening.

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.

All household pitchers used to store liquids will be labeled and dated. At time of inspection on 4/28/16, residential advisor labeled and dated pitcher. Residential advisors will check pitcher to make sure it is labeled and dated.

All food will be labeled and dated after opening. The frozen french fries were labeled and dated at time of inspection on 4/28/16. Residential advisors will check daily to make sure all food are labeled and dated. Program Director reviewed regulation and violation with residential advisors.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *E. J. Domzalik*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) E. J. Domzalik      Program Dir.      Date 5-17-16

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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
 2600.103(j) - Eating, drinking and cooking utensils shall be washed, rinsed and sanitized after each use by a method specified in 7 Pa.Code Chapter 46, Subchapter D (relating to equipment, utensils and linen).

2a. DESCRIPTION OF VIOLATION  
 A slotted wood spatula was observed in the utensil drawer.

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 personal care home will be free of wooden utensils. Residential Advisor removed wooden utensil from the home at time of the inspection on 4/28/16. Residential Advisors will conduct safety inspection twice a month to ensure proper utensils are stored in the utensil drawer. Program Director reviewed regulation and violation with Residential Advisors.

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>EB DUMBRASKI, OPER. DIR</i>	Date <i>5-17-16</i>
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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION  
On 04/28/16, there was an accumulation of lint in the lint trap of the basement dryer.

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 lint trap will be free of lint to reduce the risk of fire hazards. Lint was removed immediately from lint trap by Asst. Operation Director at time of inspection on 4/28/16. Residential Advisors will check lint trap after drying each load of clothes. Program Director reviewed regulation and violation with Residential Advisors. Program Director will check ~~dry~~ dryers periodically.

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

Signature of Legal Entity Representative  
(Required on EVERY Page) *E. Demeralli*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *E. Demeralli, Oper. Dir.*      Date: *5-17-16*

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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2800  
 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  
 According to the fire drill report dated 02/03/16 at 9:10 A.M., resident #1 could not be evacuated.

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.

All residents will be able to evacuate the home to a fire-safe area designated by fire safety expert. Program Director will make sure all residential advisors are trained on how to evacuate residents who are unable to evacuate the building. The Fire Marshall is scheduled to conduct a fire safety training on 6/7/16 and 6/9/16, to train Residential Advisors how to evacuate residents who are unable to evacuate the premises.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>EL Dempralke Oper. Dir.</i>	Date <i>5-17-16</i>
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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

1. REGULATION 55 Pa.Code §2600  
 2600.184(a) - The original container for prescription medications shall be labeled with a pharmacy label that includes the following:  
 (1) The resident's name.  
 (2) The name of the medication.  
 (3) The date the prescription was issued.  
 (4) The prescribed dosage and instructions for administration.  
 (5) The name and title of the prescriber.

2a. DESCRIPTION OF VIOLATION  
 The label for resident #2's Tussin had hand written instructions over the label.

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 original containers for all prescription medication will be labeled with a pharmacy label. Effective immediately Residential Advisors will not write on pharmacy labels. Residential Advisors will check all medication to ensure pharmacy labels <sup>are not</sup> altered. The agency nurse held a training 5/3/16 and 5/5/16 to review Medication Administration, Pharmacy Label Procedures, and Documentation. Program Director will check prescription bottles periodically to ensure medication labels are not altered.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Ed Demerski, Oper. Dir.</i>	Date <i>5-17-16</i>
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Violation Report: 12834 - 04/28/2016 - Adams, Patricia  
 PCH Name: SALISBURY BEHAVIORAL HEALTH #2

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

2a. DESCRIPTION OF VIOLATION  
 Resident #2 is prescribed blood glucose testing two times a day at 7 A.M and 4 P.M. The glucometer testing was completed on 04/24 at 5:48 A.M. and on 04/25 at 2:43 P.M., more than one hour before the prescribed time.

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 will follow the directions of the prescriber. Effective immediately Residential Advisor will check the time to ensure it is within the window of the prescriber orders. The agency nurse held medication training on 5/3/16 and 5/5/16 to review, Medication Administration, Pharmacy Label Procedures and Documentation. Program Director will check glucometer periodically to ensure Residential Advisors are following prescribers directions.

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) Ed Demma, Sr. Oper Dir	Date 5-17-16
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