



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 19 2017

Ms. Betty Ulmer, Vice President-Legal Operations
Brookdale Senior Living Communities, Inc.
7151 Saltsburg Road
Pittsburgh, Pennsylvania 15235

RE: Brookdale Penn Hills
License #: 431590

Dear Ms. Ulmer:

As a result of the Department of Human Services' annual licensing inspection on July 18, 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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: BROOKDALE PENN HILLS		License Number: 43159
Address: 7151 SALTSBURG ROAD, PITTSBURGH, PA 15235		County: Allegheny
Administrator: Judy Carrabia		Region: WEST
Legal Entity Name: BROOKDALE SENIOR LIVING COMMUNITIES INC		
Legal Entity Address: 7151 SALTSBURG ROAD, PITTSBURGH, PA 15235		RECEIVED
Certificate(s) of Occupancy C-2 LP 09/22/1997 L&I		OCT 8 2016 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support:	Total Daily Staff: 35	Waking Staff: 26
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Incident		
On-Site Inspections Dates and Department Representatives On-Site 07/18/2016: Hultquist, Cliff; Eveges, Joseph		
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: 26 Number of Residents Served: 23 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: 2 Number of Hospice Residents in past year: 10		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 23 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 12 Have a Physical Disability: 0

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OCT 31 2016

Violation Report: 43159 - 07/18/2016 - Hultquist, Cliff
PCH Name: BROOKDALE PENN HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.82(c) - Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

2a. DESCRIPTION OF VIOLATION

Not all residents of the home, including resident #1, have been assessed as able to safely use or avoid poisonous materials. At 10:24 a.m., there were two 1 quart containers of charcoal lighter fluid unattended and accessible to residents on the back patio and the containers had a manufacturer's label indicating, "call physician immediately if ingested."

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 2600.82 (c)

On July 18, 2016 the Maintenance Director removed the lighter fluid and relocated it to a secure locked storage area. The Executive Director re-trained the appropriate staff on October 28, 2016 regarding the community policy on poisonous materials. The Maintenance Technician or designee will include in weekly rounds monitoring for poisonous materials and document on the attached tool. The Executive Director will review the audit results for 3 months to determine if any further action is warranted.

Evidence- Staff training attendance log, Environmental Rounds audit tool

Completion Date: October 28, 2016

Repeat Violation: Yes Date(s) of Previous Violation(s): 12/11/2014 et al

Signature of Legal Entity Representative (Required on EVERY Page) *Judy Carrobbia*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Judy Carrobbia* Date *10/31/16*

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

The above plan of correction is approved as of 11/10/16 (Date) Plan of correction Implementation status as of 11/10/16 (Date)

The above plan of correction was approved by BS (Initials)
 Fully Implemented
 Partially Implemented - Adequate Progress *BS*
 Partially Implemented - Inadequate Progress
 Not Implemented

RECEIVED

001 31 2016

Violation Report: 43159 - 07/18/2016 - Hultquist, Cliff
PCH Name: BROOKDALE PENN HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION

None of the emergency telephone numbers were posted on or near the cordless phone in resident #3's bedroom.

The emergency telephone numbers posted for the telephone in the activities area of the home did not include the number for poison control.

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 2600.91

On July 18, 2016 phone numbers were posted in resident #3's room near the cordless phone. The number for poison control was added to the list of emergency phone numbers near the phone in the activities area at the same time. The Executive Director re-trained the appropriate staff on the community policy regarding posting of emergency phone numbers on October 28, 2016. The Maintenance Technician or designee will include on the weekly Environmental Rounds audit tool to check for posting of emergency phone numbers near phones in the common areas as well as resident rooms. The Executive Director will review audit results for 3 months to verify if any further action is warranted.

Evidence- Staff training attendance log, Environmental Rounds Audit tool

Completion Date: October 28, 2016

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Sudy Carrobbia*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Sudy Carrobbia* Date *10/31/16*

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(Date)

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(Date)

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(Initials)

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Violation Report: 43159 - 07/18/2016 - Hultquist, Cliff
PCH Name: BROOKDALE PENN HILLS

OCT 31 2016

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.

2a. DESCRIPTION OF VIOLATION

There were multiple clumps of lint, paper towels, and a wash cloth behind the dryer in the B corridor laundry room.
There was a wooden board leaning against furnace #2 in the comidor A mechanical room. There were also 4 wooden broom handles leaning against the fumace.

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 2600.125 (a)

The clumps of lint, paper towels and wash cloth were removed from behind the dryer day of survey. The 4 wooden broom handles were also removed and placed in storage away from the heat source. The appropriate staff were re-trained by the Executive Director on the community policy regarding combustibile and flammable materials stored near heat sources on October 28, 2016. The Maintenance Technician or designee will conduct environmental rounds weekly which will include noting areas around heat sources for possible combustibile materials. The Executive Director will review audit results for 3 months to verify if any farther action is warranted.

Evidence- Staff training attendance log, Environmental Rounds Audit tool

Completion Date: October 28, 2016

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Judy Carrabbia*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Judy Carrabbia* Date *10/31/16*

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(Date)

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(Date)

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- Not Implemented

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

Handwritten: (11/23/16)

OCT 21 2016

Violation Report: 43159 - 07/18/2016 - Hultquist, Cliff
PCH Name: BROOKDALE PENN HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

Resident #2 was admitted on [redacted] 16; however, the preadmission screening was completed on [redacted] 16.

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 2600.224 (a)

he Executive Director re-trained the appropriate staff on the community policy regarding completion of the pre-admission screen on October 28, 2016. The Resident Care Coordinator will audit all new resident records for 3 months for completion of the pre-admission screen on a timely basis The Executive Director will review audit results for 3 months to verify if any further action is warranted.

Evidence- Staff training attendance log

Completion Date: October 28, 2016

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Judy Carrabba*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Judy Carrabba* | Date *10/31/16*

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