



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: JUN 29 2017

Natalie Romano,
Executive Director
Brookdale Senior Living Communities, Inc.
160 Elephant Road
Dublin, Pennsylvania 18917

RE: Brookdale Dublin
License #: 127350

Dear Ms. Romano:

As a result of the Department of Human Services' licensing inspection on 03/08/2017 and 3/9/2017, on which we conducted on-site inspections] 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 "Roslyn Brewer".

Roslyn Brewer
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: BROOKDALE DUBLIN		License Number: 12735
Address: 160 ELEPHANT ROAD, DUBLIN, PA 18917		County: Bucks
Administrator: Natalie Romano		Region: SOUTHEAST
Legal Entity Name: BROOKDALE SENIOR LIVING COMMUNITIES INC		
Legal Entity Address: 160 ELEPHANT ROAD, DUBLIN, PA 18917		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 40	Waking Staff: 30
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 03/08/2017: Kazlmer, Lauren		
Off-Site Inspection Dates and Inspectors, If Applicable 03/09/2017: Kazlmer, Lauren		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 26 Number of Residents Served: 20 Secured Dementia Care Unit In Home: Yes Area: Entire Building Secured Dementia Unit Capacity, If Applicable: 26 Number of Residents Served in Secured Dementia Care Unit, If applicable: 20 Number of Current Hospice Residents: 2 Number of Hospice Residents in past year: 4		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 20 Have Mental Illness: 0 Have an Intellectual Disability: 20 Have a Mobility Need: 20 Have a Physical Disability: 0

Violation Report: 12735 - 03/08/2017 - Kazlmer, Lauren
 PCH Name: BROOKDALE DUBLIN

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION :

On 2/18/17, staff person A witnessed staff person B slap resident #1's right arm. Staff person A did not report the incident until 2/19/17. An Act-13 was not submitted local Area Agency on Aging.

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 2600.15(a)

The completed Act 13 form was immediately submitted to the Area Office on Aging by the Health and Wellness Director. On March 10, 2017 appropriate staff members were re-trained by the Executive Director and Health and Wellness Director on the OAPSA Act and their responsibility to immediately report suspected abuse to the local area agency on aging not only verbally but in writing on the required form. Phone numbers of the agency were posted in the community and copies of the form were supplied to the management team. On March 27th, 2017, the Executive Director retrained all management staff on the use of Act 13 and how to submit it to the Area Agency on Aging in order to be in compliance with all Abuse Reporting Protocol. The community will continue to provide education on the community's policy regarding Abuse and Neglect at employee orientation. Training will also be conducted in individual circumstances as warranted. The Health and Wellness Director or designee review will monitor any allegations of abuse for submission to the local area agency on aging. The Executive Director or designee will review orientation and annual training for completion of required trainings monthly to verify if further action is warranted.

Evidence: Training Attendance Sheets

Completion Date: March 27, 2017

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
<i>Natalie Romano</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date
Natalie Romano Executive Director			3-27-17
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of		Plan of correction implementation status as of	
<i>2/20/17</i> (Date)		<i>3/30/17</i> (Date)	
The above plan of correction was approved by		<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	
<i>[Signature]</i> (Initials)			

Violation Report: 12735 - 03/08/2017 - Kazimer, Lauren PCH Name: BROOKDALE DUBLIN
1. REGULATION 55 Pa.Code §2600 2600.42(c) - A resident shall be treated with dignity and respect.
2a. DESCRIPTION OF VIOLATION On 2/18/17, staff person B slapped resident #1's right forearm because the resident had allegedly dug their nails into staff person B when transferring the resident to the toilet.
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 2600.42 (c)

Upon Executive Director notification of the incident on 02/19/17, staff person A was suspended pending investigation and the incident was reported to the Area Office on Aging verbally and Department of Human Services (DHS) immediately. Following investigation staff person A was subsequently terminated.

On March 10, 2017, the Health and Wellness Director and Executive Director retrained all staff on the community policy on treating residents with respect and dignity. The community will continue to provide education on this topic at employee orientation and on an annual basis. Training will be conducted in individual circumstances as warranted. The Health and Wellness Director and Resident Care Coordinator will continue to raise awareness regarding resident dignity within the community, and they will monitor that staff are treating residents with respect at all times. The Executive Director or designee will review orientation and annual training for completion of required trainings monthly to verify if further action is warranted.

Evidence: Training Attendance Sheets

Completed: March 24, 2017

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Natalie Romano</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Natalie Romano Executive Director</i>		Date <i>3-27-17</i>	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of <i>3/27/17</i> (Date)		Plan of correction implementation status as of <i>3/27/17</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	