



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 15 2017

Ms. Cynthia Mazza,
VP/COO
Salisbury Behavioral Health Inc.
3894 Courtney Street, Suite 100
Bethlehem, Pennsylvania 18017

RE: Salisbury Behavioral Health PCH of Monroe County
1482 Cherry Lane
East Stroudsburg, Pennsylvania 18301
License #: 212130

Dear Ms. Mazza:

As a result of the Department of Human Services' annual licensing inspections on June 20, 2017 and June 21, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION
 The home did not have posted in a public and conspicuous area a copy of the 2600 Personal Care Home regulations.

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 Administrator/Assist Administrator will make sure the 2600 Personal Care Home regulations are posted in a public and conspicuous area in the building at all times. Administrator/ Assist Administrator will check weekly to make sure the 2600 Personal Care Home regulations has not be removed from the public and conspicuous area in the building.
 See attached weekly audit.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Kristina Allen Administrator</i>	Date <i>7-21-17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>7/24/17</u> (Date)	Plan of correction implementation status as of <u>7/24/17</u> (Date)
The above plan of correction was approved by <u>M</u> (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: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION
 On numerous occasions, resident and staff interviews indicated that former staff person "A" was disrespectful, rude and abrupt to residents presenting himself/herself in an unprofessional manner. Residents commented that staff person "A" had a poor attitude on a daily basis.

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.

Salisbury Behavioral Health understands the importance in Resident's Rights and following regulations to insure that all residents are treated with dignity and respect. The staff member that did not follow such guidelines is no longer employed by Salisbury Behavioral Health. The employee was not employed during the inspection time, he/she termination date was [redacted] 2017.
 Immediately and Ongoing
 Residents will be treated with dignity and respect.

The administrator shall monitor and assure ongoing compliance.

[Signature]
 7/24/17

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)	Date
<i>Kristena Allen Administrator</i>	<i>7-21-17</i>

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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

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
 On 06-20-17 during the initial walk through of the home, the home's housekeeping cart was observed left open and unattended in the hall near residents' rooms. The facility has residents who were assessed as being unsafe to manage household poisons. The cart had the following items: one 32 ounce container of Lysol brand toilet cleaner which stated is corrosive and contact poison control and seek medical attention if swallowed. One 32 ounce of H2 Orange brand concentrated cleaning solution which states call poison control or seek emergency medical attention if the substance is swallowed.

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 is currently posted to the cleaning chart for staff to see.
 Administrator/ Assist Administrator will make sure the staff is provided with the proper key to lock the cleaning cart. All staff handling the cleaning cart are provided with a key to lock the cleaning cart while in use and/or pull the cleaning cart into the bedroom they are currently cleaning. While the cleaning cart is in the hallway the cart will remain locked at all times.

- The administrator shall monitor and assure ongoing compliance. *MA*
 7/24/17

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Kristena Allen Administrator			7-21-17

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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
 Room # 18's toilet was heavily stained with what appeared to be fecal matter staining the interior and exterior surfaces of the toilet. The sink had a heavy film of soap scum, toothpaste and dirt.
 Room# 33's toilet had a heavy layer of brown rust colored staining in the interior surface of the toilet bowl.

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.

Task sheets for staff and housekeepers has been changed.
 Hallway A restrooms are cleaned and mopped Tuesday and Thursday of every week.
 Hallway B restrooms are cleaned and mopped Monday, Wednesday, and Friday of every week.
 Residents who have difficulty with keeping there bedrooms tidy, rooms will be cleaned twice a week in addition to the restroom new task sheet.

The administrator shall monitor and assure ongoing compliance.

m
 7/24/17

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Violation Report: 21213 - 06/20/2017 - OHaire, Anne
PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
The home had a path leading to a nearby lake that had no signage or barriers indicating the area was a drowning hazard.

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.

On June 20, 2017, Maintenance/facilities department placed a bright yellow "Caution" sign and chain barrier at the beginning of the path that leads to the lake. Residents are made aware of the dangers of the lake and instructed not to walk/run towards the lake.

The administrator shall monitor and be responsible for ongoing compliance.

m
7/24/17

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

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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.125(b) - Combustible materials shall be inaccessible to residents.

2a. DESCRIPTION OF VIOLATION
 The home's designated smoking area located on the rear outside deck was observed to have approximately 15 to 20 cigarette butts that were discarded on the wooden floor of the deck creating a potential fire hazard.

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.

DCS will clean smoking areas and egress twice each shift. DCS keeps a log of the smoking area and egress areas on a daily task sheet. All cigarette containers will be emptied and smoking area will be swept and cleaned of all combustible materials.

The administrator shall monitor and assure ongoing compliance -
 m 7/26/17

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

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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kristina Allen Administrator* Date *7-21-17*

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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
 The home conducted only one sleep hour fire drill during the past 12 month period of 06-20-16 thru 06-20-17. One sleep hour drill was conducted on 11-29-16 at 1:30 AM.

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.

Immediately and Ongoing
 The home will use the Department's model fire drill to preform fire drills at different time and on different shifts. Fire drills will be preformed once every month and two during sleeping hours every 6 months. The Administrator/ Assist Administrator has added an addition designed person to perform fire drills during sleeping hours.

The administrator shall monitor and be responsible for ongoing compliance.
MA
7/24/17

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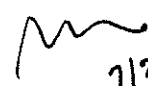
Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION
 The home conducted a fire drill on 01-31-17 at 3:15 PM. Resident #1 was in the shower at the time and did not evacuate the building during the fire drill.

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 monthly fire drills will be unannounced, held on different days of the week and at different times of day/on different shifts. The importance of participation in fire drills is discussed during the admissions process, and can also be found in the "house rules" section of the personal care home agreement. The administrator and staff will work with any resident who refuses to participate in a fire drill, and will educate that resident again on the importance of participation. Should a resident continue to be non-compliant during fire drills, the administrator will call a team meeting to discuss how best to assist the resident with ensuring he/she is compliant. If necessary, a behavioral plan will be established with the resident and the resident's team. Should the non compliant continue, the team will meet once again to address whether the needs of this resident are best served in this home or elsewhere.

The administrator shall monitor and assure ongoing compliance -

 7/24/17

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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600
 2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.


2a. DESCRIPTION OF VIOLATION
 During the initial walk through of the facility, the home did not have the upcoming week's menu posted for 06-25-17 thru 07-01-17.

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.

Administrator/ Assist Administrator will make sure the menu for two weeks are posted in a conspicuous and public place in the home. Administrator/ Assist Administrator will do weekly checks to make sure the menu has not been removed from the conspicuous and public place in the home. Administrator has hired a new Resident Advisor to preform the duties of making the menu, doing inventories of the food and/or expiration dates of food, and ordering of the food.


Repeat Violation: No	Date(s) of Previous Violation(s):		
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Violation Report: 21213 - 06/20/2017 - O'Haire, Anne
 PCH Name: SALISBURY BEHAVIORAL HEALTH PCH OF MONROE COUNTY

1. REGULATION 55 Pa.Code §2600

2600.182(b) - Prescription medication that is not self-administered by a resident shall be administered by one of the following:

- (1) A physician, licensed dentist, licensed physician's assistant, registered nurse, certified registered nurse practitioner, licensed practical nurse or licensed paramedic.
- (2) A graduate of an approved nursing program functioning under the direct supervision of a professional nurse who is present in the home.
- (3) A student nurse of an approved nursing program functioning under the direct supervision of a member of the nursing school faculty who is present in the home.
- (4) A staff person who has completed the medication administration training as specified in § 2600.190 for the administration of oral, topical, eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Through the review of the home's direct care staff work schedule, it was determined that on overnight work shifts, the home did not have staff available who were trained in Medication Administration. The home's administration reported that trained staff are called in to the home to administer medications when the need arises. Through interviews with residents, it was also determined that when residents' requested PRN medications during overnight shifts, he/she are told by staff that they would have to wait for the day shift staff to arrive to receive the medication.

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.

We would like to challenge this violation as it was discussed during the inspection. Several documents providing sufficient evidence were presented which showed that residents were provided access to their PRN medications during shifts when on-call workers had to come in and administer meds. The inspectors selected several dates where untrained staff were scheduled and the facility was able to show that on-call staff had come in during those nights to administer medications when they were requested.

- Immediately and on-going Administrator and/or Assist Administrator will make sure there will be a trained medication administration staff member on-site for all scheduled shifts as per regulation 2600.190.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kristen Allen Administrator* Date *7-21-17*

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