pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [redacted]
MAILING DATE: April 13, 2018

Ms. Stacey Meyer
Assistant Secretary
Emeritus Corporation
6737 West Washington Street, Suite 2300
Milwaukee, Wisconsin 53214

RE: Brookdale Bloomsburg
420 Shaffer Road
Bloomsburg, Pennsylvania 17815
License #: 211200

Dear Ms. Meyer:

As a result of the Department of Human Services' licensing inspection on November 28, 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.

Sincerely,

Michele Moskalczyk
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: BROOKDALE BLOOMSBURG	**License Number:** 21120
Address: 420 SHAFFER ROAD, BLOOMSBURG, PA 17815	**County:** Columbia
Administrator: Julie Heeter	**Region:** NORTHEAST

Legal Entity Name: EMERITUS CORPORATION

Legal Entity Address: 6737 W WASHINGTON ST SUITE 2300, MILWALKEE, WI 53214

Certificate(s) of Occupancy

C-2 LP
02/26/1997
PA Dept of L&I

Staffing Hours

Resident Support: 6 **Total Daily Staff:** 49 **Waking Staff:** 37

Type of Inspection: Partial **BHA Docket Number:** **Notice:** Unannounced

Reason(s) for Inspection(s)

Complaint

On-Site Inspections Dates and Department Representatives On-Site

11/28/2017: Yellenic, Cindy

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: 67

Number of Residents Served: 37

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: 1

Number of Hospice Residents in past year: 12

Number of Residents who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 36

Have Mental Illness: 0

Have an Intellectual Disability: 1

Have a Mobility Need: 6

Have a Physical Disability: 1

Violation Report: 21120 - 11/28/2017 - Yellenic, Cindy
PCH Name: BROOKDALE BLOOMSBURG

1. REGULATION 55 Pa.Code §2600
2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION
Upon entering the facility at 9:00am, the narcotic book was left on top of the medication cart, unlocked and accessible to unauthorized persons.

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 2600.17

Immediately, the Executive Director secured the narcotic book to assure it was not accessible to unauthorized persons. On January 10, 2018, the Executive Director retrained the appropriate staff regarding the community policy on "Confidentiality of Information" with focus on storage of the narcotic book. The Health and Wellness Director or designee will audit the medication carts weekly for 3 months for proper storage of the narcotic book. The Executive Director will monitor the audit results for 3 months to verify if any further action is warranted.

Evidence: Attendance in-service sheet, meeting minutes
Completion Date: January 10, 2018

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

Signature of Legal Entity Representative (Required on EVERY Page) Julie L Heeter, ED

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Julie L Heeter, Executive Director **Date** 3/23/18

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

The above plan of correction is approved as of 4/12/18 (Date)

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

Plan of correction implementation status as of 4/12/18 (Date)

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

Violation Report: 21120 - 11/28/2017 - Yellenic, Cindy
PCH Name: BROOKDALE BLOOMSBURG

1. REGULATION 55 Pa.Code §2600
2600.181(c) - A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

2a. DESCRIPTION OF VIOLATION
Resident #1 admitted his/her medications were left in a cup at bedside on 11-19-17 by Staff Person A. Resident #1 cannot self-administer medications as indicated on his/her DME.

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 2600.181 (c)

Immediately, it was determined by investigation resident #1 received all medications as prescribed. Immediately, Staff Person A was disciplined according to community policy. Staff Person A no longer works for Brookdale Bloomsburg effective December 4, 2017. On January 10, 2018, appropriate staff were retrained on the community policy regarding "Self-Administration of Medications" by the Health and Wellness Director and Executive Director. Any resident that is permitted to self-administer their medications will be evaluated at least every 6 months as per community policy. All resident charts were reviewed for residents who are assessed to have the ability to self-administer in accordance with the DME, or prescriber orders. The Executive Director will review the audit results to verify if any further action is warranted.

Evidence- Staff training attendance log, Self- Administration Review Form, policy on Medication Self-Administration, meeting minutes from January 10, 2018

Completion Date: January 10, 2018

Repeat Violation: No	Date(s) of Previous Violation(s):			
Signature of Legal Entity Representative (Required on EVERY Page)	Julie L Heeter, ED			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Julie L Heeter, Executive Director	**Date**	3/23/18	

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Violation Report: 21120 - 11/28/2017 - Yellenic, Cindy
PCH Name: BROOKDALE BLOOMSBURG

1. REGULATION 55 Pa.Code §2600

2600.182(c) - Medication administration includes the following activities, based on the needs of the resident:
(1) Identify the correct resident.
(2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly.
(3) Remove the medication from the original container.
(4) Crush or split the medication as ordered by the prescriber.
(5) Place the medication in a medication cup or other appropriate container, or in the resident's hand.
(6) Place the medication in the resident's hand, mouth or other route as ordered by the prescriber, in accordance with the limitations specified in § 2600.182(b)(4).
(7) Complete documentation in accordance with § 2600.187 (relating to medication records).

2a. DESCRIPTION OF VIOLATION

Staff Person A left Resident #1's medications on a table at bedside. Resident #1 is unable to self-administer medications.

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 2600.182 (c)

Immediately, it was determined y investigation resident #1 received all medications as prescribed. Staff Person A was disciplined according to community policy. Staff Person A no longer works for Brookdale Bloomsburg effective December 4, 2017. On January 10, 2018, appropriate staff were retrained on the community policy regarding "Self-Administration of Medications" by the Health and Wellness Director and Executive Director. Any resident that is permitted to self-administer their medications will be evaluated at least every 6 months as per policy. All resident records were reviewed for residents who are assessed to have the ability to self-administer in accordance with the DME, or prescriber orders. The Executive Director will review the audit results to verify if any further action is warranted.

Evidence- Staff training attendance log, Self- Administration Review Form, community policy on Self-Medication Administration

Completion Date: January 10, 2018

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

Signature of Legal Entity Representative
(Required on EVERY Page) Julie L Heeter, ED

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Julie L Heeter, Executive Director — **Date** 3/23/18

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Violation Report: 21120 - 11/28/2017 - Yellenic, Cindy
PCH Name: BROOKDALE BLOOMSBURG

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

(1) Resident's name.
(2) Drug allergies.
(3) Name of medication.
(4) Strength.
(5) Dosage form.
(6) Dose.
(7) Route of administration.
(8) Frequency of administration.
(9) Administration times.
(10) Duration of therapy, if applicable.
(11) Special precautions, if applicable.
(12) Diagnosis or purpose for the medication, including pro re nata (PRN).
(13) Date and time of medication administration.
(14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Resident #2's Medication Administration record was not initialed after the medications Lotrisone and Calazine were administered on 11-23-17 at 10:00pm.

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 2600.187 (a)

Immediately, the medication was verified as administered. The Executive Director and the Health and Wellness Director completed an in-service to appropriate staff with on the Community's policy regarding "Medication Administration" focusing on documentation on January 10, 2018. Audits of the Medication Administration Record will occur weekly by the Health and Wellness Director or designee for 2 months. The Executive Director will review the audit results for 2 months to verify if any further action is warranted.

Evidence- Staff training attendance log

Completion Date: January 10, 2018

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

Signature of Legal Entity Representative (Required on EVERY Page) Julie L Heeter, ED

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Julie L Heeter, Executive Director Date 3/23/18

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