



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailing Date: August 1, 2018

Mr. Hugh Davis,
Chief Executive Officer
Menno-Haven, Inc.
2011 Scotland Avenue
Chambersburg, Pennsylvania 17201

RE: Brookview Personal Care Center
2075 Scotland Avenue
Chambersburg, Pennsylvania 17201
Certificate #: 336710

Dear Mr. Davis:

As a result of the Department's Bureau of Human Services Licensing inspection on July 2, 2018 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 "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: BROOKVIEW PERSONAL CARE CENTER		License Number: 33671
Address: 2075 SCOTLAND AVENUE, CHAMBERSBURG, PA 17201		County: Franklin
Administrator: Amy Fager		Region: CENTRAL
Legal Entity Name: MENNO HAVEN INC		
Legal Entity Address: 2011 SCOTLAND AVENUE, CHAMBERSBURG, PA 17201		
Certificate(s) of Occupancy C-2 LP 05/06/2001 Labor & Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 83 Waking Staff: 62		
Type of Inspection: Partial BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 07/02/2018: McCloskey, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable 07/24/2018: McCloskey, Jason		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 130 Number of Residents Served: 80 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: 3 Number of Hospice Residents in past year: 8	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 80 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 3 Have a Physical Disability: 3	

Violation Report: 33671 - 07/02/2018 - McCloskey, Jason
PCH Name: BROOKVIEW PERSONAL CARE CENTER

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 6/1/18, Resident 1 fell. X-rays taken that day revealed fractures of resident's left ribcage. The home did not report the fall and injuries until 6/6/18.

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 Director, or designee, will report all fractures, within 24 hours to The Department here forward. In addition, the Director has conducted education with all nursing staff on appropriate investigation and response to incidents, including falls. This training was conducted on 5/1/18 and included a case study of a recent fall. Because of that training, Director believes the response to the said fall of resident #1 on 6/1/18 was handled, documented and followed-up on appropriately by the nursing staff. However, in order for the continued education of the staff and the improved safety of the residents, Director and Nursing Supervisor will be developing and conducting further education on the reduction of injury related to falls. An Administrative Review Team will be formulated and additional training will be conducted utilizing a similar standard for unusual occurrences as the Brookview Health Care Center. Please see the attached document to understand the unusual occurrence process the Review Committee will begin utilizing on August 6th. Between this day and August 6th the Director and Nursing Supervisor will be selecting the Administrative Review Team, educating the team members on the new process and formulating necessary forms with the IT department at Menno Haven. The goal of the Review Team is to not only reduce injury related to falls but to also implement interventions and a more robust usage of the care plans/support plans. This will include increased communication with residents, family members and nursing team members as follow-up to any unusual occurrence; not just falls.

*The administrator will review the incident reports submitted to the Department during each Quality Management meeting, in order to review the timeliness of reporting.

BAS 8/1/18

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Amy R Fager
Director of Personal Care Date 7/31/18

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

The above plan of correction is approved as of <u>8/1/18</u> (Date)	Plan of correction implementation status as of <u>8/1/18</u> (Date)
The above plan of correction was approved by <u>BAS</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: 33671 - 07/02/2018 - McCloskey, Jason
 PCH Name: BROOKVIEW PERSONAL CARE CENTER

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 main entrance of the home has a sloped, paved driveway with an adjacent concrete sidewalk. The sidewalk is higher than the driveway by approximately 1" to 1.5" depending on where measured. At 4:30pm on 7/2/18, Resident #2 fell while ambulating with the aid of a walker. The walker's leg went over the edge of the sidewalk causing the resident to lose his/her balance and fall.

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.

In order to keep building grounds free of hazards, Fayetteville Contractors will be removing approximately 20ft x 8ft of existing asphalt. They will replace that asphalt with new asphalt and bring the elevation of the asphalt to the same elevation as the sidewalk. This will make the sidewalk and driveway even the entire length of the sidewalk; there will be no step-downs from the curb to the asphalt in that area. This work was originally planned for 7/24, but due to the recent inclement weather, the project will be completed by 8/15. Upon completion of the project, photos will be sent to The Department. The driveway repair will allow for residents and guests to be free of hazards as they move in and out of the main entrance to Brookview Personal Care Center.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Amy R Fager*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>AMY R Fager Director of Personal Care</i>	Date <i>7/31/18</i>
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