



**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: September 17, 2018**

Ms. Karen Russell  
Executive Director  
Mars Holding, Inc.  
191 Scharberry Lane  
Mars, Pennsylvania 16046

RE: Rosecrest Assisted Living Residence  
PO Box 1285  
1000 Graham Way  
Mars, Pennsylvania 16046  
Certificate #: 444450

Dear Ms. Russell:

As a result of the Department's Bureau of Human Services Licensing inspection on August 2, 2018, of the above facility, the violations with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) 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 "Jon B. Kimberland".

Jon Kimberland  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

**LICENSING INSPECTION SUMMARY**  
**Assisted Living Residences – 55 Pa.Code § 2800**

<b>ALR Name:</b> Roserest Assisted Living Residence	<b>License Number:</b> 44445-0
<b>Address:</b> 1000 Graham Way Mars, PA 16046	<b>County:</b> Butler
<b>Administrator:</b> Deborah Serafine	
<b>Legal Entity Name:</b> Mars Holding, Inc.	
<b>Legal Entity Address:</b> 191 Scharberry Lane, Mars, PA 16046	
<b>Certificate(s) of Occupancy:</b> I-1 Mars Borough	
<b>Type of Inspection:</b> Partial	
<b>Reason(s) for Inspection(s):</b> Incident	
<b>On-Site Inspections Dates and Department Representatives On-Site:</b> 8/2/18, Trish Bartlett, Scott Klein	
<b>Off-Site Inspection Dates and Inspectors, If Applicable:</b>	
<b>Resident Demographic Data as of Inspection Dates</b>	
<b>Licensed Capacity: 30</b>  <b>Number of Residents Served: 26</b>  <b>Secured Dementia Care Unit in Home: entire facility</b>  <b>Area:</b> <b>Secured Unit Capacity, if Applicable: 30</b>  <b>Number of Residents Served in Secured Dementia Care Unit, if applicable: 26</b>  <b>Number of Current Hospice Residents: 1</b>  <b>Number of Hospice Residents in past year: 3-5</b>	<b>Number of Residents who:</b>  <b>Receive Supplemental Security Income: 0</b>  <b>Are 60 Years of Age or Older: 26</b>  <b>Have Mental Illness: 0</b>  <b>Have an Intellectual Disability: 0</b>  <b>Have a Mobility Need: 26</b>  <b>Have a Physical Disability: 0</b>

**Regulation:**

2800.23(a) - A residence shall provide each resident with assistance with ADLs and appropriate cueing for ADLs as indicated in the resident's assessment and support plan.

**Violation:**

Resident #1's assessment and support plan, dated 4/7/18, indicates resident #1 is to receive the prescribed oxygen and CPAP as follows: oxygen at 2 liters/minute via nasal cannula at all awake times and continuous positive airway pressure, CPAP, with humidification during sleep. However, on 7/17/18 from approximately 9:00 p.m. to 7/18/18 at approximately 6:30 a.m., the oxygen and CPAP were not administered.

**Plan of Correction**

Please see attached Plan of Correction

Pages 2A and 2B of 2

Printed Name and Title of Legal Entity Representative (Required on all pages)

Deborah Serafini, Administrator

Signature of Legal Entity Representative (Required on all pages)

Date

8/17/2018

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

The above plan of correction is approved as of 8/31/18  
(Date)

Plan of correction implementation status as of 8/31/18  
(Date)

Fully Implemented

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

Partially Implemented - Adequate Progress g

Partially Implemented - Inadequate Progress  
Not Implemented

## RoseCrest Assisted Living Plan of Correction

August 17, 2018

Certificate # 444450

### Regulation:

2800.23(a) – A residence shall provide each resident with assistance with ADLs and appropriate cueing for ADLs as indicated in the resident’s assessment and support plan.

### Violation:

Resident #1’s assessment and support plan, dated 4/7/18, indicates resident #1 is to receive the prescribed oxygen and CPAP as follows: oxygen at 2liters/minute via nasal cannula at all awake times and continuous positive airway pressure, CPAP, with humidification during sleep. However, on 7/17/18 from approximately 9:00pm to 7/18/18 at approximately 6:30am, the oxygen and CPAP were not administered.

### Plan of Correction

Regulation 2800.23(a) is important to ensure that the residents are receiving the proper assistance or appropriate cueing needed for their specific situation. Each resident is different, so it is important that the assessment and support plans are followed to ensure we are providing the appropriate care to each and every one of our residents at all time.

The regulation was violated when Employee #1 did not follow the instructions in the care plan and did not put Resident #1 on oxygen or on her CPAP on the night of 7/17/18. These actions by this employee caused this violation to occur.

8/31/18 *g*

*Deborah Serafini, Administrator*

In response to the incident that occurred on the night of 7/17/18 and the morning of 7/18/18, we immediately added orders to the Electronic Health system, Vision, of all residents on oxygen and to Resident #1 for her CPAP, to state the following:

Resident #1:

CPAP to be on resident at all times while in bed sleeping. Staff to check on resident hourly to see that her CPAP is on her and working properly. If CPAP is off resident, staff to place CPAP back on resident. This order appears at 9:00pm and continues to appear hourly until 8:00am.

All other residents receiving only Oxygen at night:

Nasal O2 at all times at hour of sleep while resident is in bed. Staff to check on resident hourly to see that O2 is on her. If O2 is off resident, staff to place O2 back on resident. This order appears at 9:00pm and continues to appear hourly until 8:00am.

All care plans of residents that are on oxygen have been audited as well as their orders in Vision to ensure that they are correct and have been updated with the new hourly orders. Resident #1 is the only resident currently that has a CPAP and her care plan and orders have been audited to ensure accuracy.

In addition to these new orders, Apria will be coming in on Thursday, August 23rd at 3:00pm to provide training to all staff on the proper procedures and usage of the CPAP machine. This will ensure that all staff is knowledgeable on how to appropriately turn on machine and place on resident. They will also be able to identify any issues that may arise with the equipment throughout the night.

Moving forward since 7/18/18, the Health Care Coordinators will be responsible for checking Vision to ensure that these orders were followed and signed off on hourly during the 3-11 and 11-7 shifts. Re-education will be provided to any staff member if the deficient practice is noted in the future.

8/31/18



Deborah Serafini, Admini Strator