



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

JAN 24 2019

Mr. Michael A. Palermo  
Administrator - Owner  
Vive Bene, Inc.  
801 Market Street  
Williamsport, Pennsylvania 17701

RE: Tilburg's Home for the Young at Heart  
License #: 218390

Dear Mr. Palermo:

As a result of the Department's Bureau of Human Services Licensing annual inspection on November 1, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report 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](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  
Violation Report

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

PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART		License Number: 21839
Address: 801 MARKET STREET, WILLIAMSPORT, PA 17701		County: Lycoming
Administrator: MICHAEL PALERMO		Region: NORTHEAST
Legal Entity Name: VIVE BENE INC		
Legal Entity Address: 801 MARKET STREET, WILLIAMSPORT, PA 17701		
Certificate(s) of Occupancy C-2 LP 06/28/1971 L&I		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 14	Waking Staff: 11
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 11/01/2018: Bomberger, Cybil; Mendez, Vanessa		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 24 Number of Residents Served: 14 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: 0 Number of Hospice Residents in past year: 0		<b>Number of Residents who:</b> Receive Supplemental Security Income: 11 Are 60 Years of Age or Older: 8 Have Mental Illness: 13 Have an Intellectual Disability: 5 Have a Mobility Need: 0 Have a Physical Disability: 0

Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

**1. REGULATION 55 Pa.Code §2600**

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

**2a. DESCRIPTION OF VIOLATION**

Staff person A, hired 10-17-18 and Staff person B, hired 6-29-18 did not receive the training required to be completed on or before the first day of work. Training required for this regulation was completed on 10/19/2018 for staff person A and on 07/02/2018 for staff person B.

**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.

- ① This regulation is to ensure that staff is trained properly
- ② The two staff members were trained late.
- ③ The two staff members were trained late
- ④ Staff training was not completed in a timely manner.
5. The checklist of staff training will be completed before new staff are permitted to work.
6. The administrator will ensure that all required staff training is complete before staff is permitted to work.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>MICHAEL A. PALERMO</i>	Date <i>12-18-18</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 1-9-19  
 (Date)

The above plan of correction was approved by *[Signature]*  
 (Initials)

Plan of correction implementation status as of 1-9-19  
 (Date)

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

Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600  
 2600.96(a) - The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

2a. DESCRIPTION OF VIOLATION  
 The first aid kit located in the home's kitchen on the first floor did not contain a thermometer.

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.

- ① This regulation is to ensure that a complete first aid kit is kept available for use.
- ② a thermometer was missing from the first aid kit
- ③ a thermometer was missing from the first aid kit.
- ④ a thermometer was purchased on 11/02/18.
- ⑤ a monthly check of the first aid kit will be performed.
- ⑥ The administrator or designee will perform a monthly check of the first aid kit to ensure compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>MICHAEL A. PALERMO</i>	Date <i>12-18-18</i>
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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600  
 2600.107(d) - The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

2a. DESCRIPTION OF VIOLATION  
 The home's emergency procedures letter was last reviewed for update on 04/12/2017.

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.

- ① This regulation is to ensure that emergency procedures are reviewed, updated and submitted annually.
- ② The emergency procedures letter was not printed
- ③ The emergency procedures letter was not printed from E-mail.
- ④ Emergency procedures manual was reviewed on April 28, 2018
- ⑤ Written emergency procedures will be reviewed annually
- ⑥ The receipt of the emergency review will be kept.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Michael A. PALERMO*      Date *12/18/18*

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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

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's fire drill record indicates the home did not complete a fire drill during sleeping hours within the past 6 six months. The most recently completed sleeping-hours fire drill was conducted on 01/24/2018 at 11:00 pm.

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.

- ① This regulation is to ensure that a fire drill is completed during sleeping hours once every 6 months.
- ② a sleeping hours fire drill wasn't held within the past 6 months.
- ③ a sleeping hours fire drill was not held
- ④ a sleeping hours fire drill will be held at a future date.
- ⑤ Sleeping hours fire drills will be held every three months.
- ⑥ The administrator or designee on duty will hold a sleeping hours fire drill

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>MICHAEL A. PALERMO</i>	Date <i>12-18-18</i>
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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

**1. REGULATION 55 Pa.Code §2600**

2600.183(f) - Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

**2a. DESCRIPTION OF VIOLATION**

A 0.4 mg Nitroglycerin Sub for resident #1 expired on 09/2018.

**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.

- ① This regulation is to ensure that medications that have been expired, discontinued or for residents who are no longer served at the home.
- ② The medication had expired.
- ③ The medication had expired.
- ④ The medication was removed and reordered.
- ⑤ The pharmacy will send a technician to review and inspect the medication cart monthly.
- ⑥ The administrator will instruct the staff to conduct a bi-monthly review of medication to ensure medications are current to residents needs.

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Signature of Legal Entity Representative  
 (Required on EVERY Page) *M. A. Palermo*

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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600  
 2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION  
 Medication for administration at 5 pm was marked as given at 2:30 pm for resident #2 of 20 mg Prazole Cap.

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.

- ① This regulation is to ensure that medication is recorded at the time of administration.
- ② The medication was marked as given to early.
- ③ The medication was marked as given to early.
- ④ The staff was re-educated on proper recording procedures.
- ⑤ The staff were educated about recording medication administration at the time of administering medication.
- ⑥ The administrator will perform spot checks to ensure compliance.

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Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Michael A. PALERMO*      Date *12-18-18*

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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
 PCH Name: TILBURG S HOME FOR THE YOUNG AT HEART

1. REGULATION 55 Pa.Code §2600  
 2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION  
 There was no Preadmission Screen Form in the record for resident #3 (admitted on 05/30/2018).

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.

- ① This regulation is to ensure that a determination of the home's ability to care for a resident
- ② There was not a preadmission screening completed.
- ③ There was not a preadmission screening completed.
- ④ The Pre-admission screening was completed on 11/2/18.
- ⑤ a review was conducted to verify that all residents files are complete.
- ⑥ The administrator will ensure that any new resident receive a pre-admission screening before admission.

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 (Required on EVERY Page) *M. A. Palermo*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *MICHAEL A. PALERMO*      Date *12-18-18*

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Violation Report: 21839 - 11/01/2018 - Bomberger, Cybil  
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1. REGULATION 55 Pa.Code §2600  
 2600.227(g) - Individuals who participate in the development of the support plan shall sign and date the support plan.

2a. DESCRIPTION OF VIOLATION

The Resident Assessment Support Plan for resident #3 dated 06/03/2018 was not signed by staff or preparer of the RASP.

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.

- ① This regulation was violated because the RASP was not signed
- ② The RASP was not signed by staff/person.
- ③ The RASP was not signed by preparer.
- ④ The RASP was signed by preparer after inspection
- ⑤ Each RASP for each resident was reviewed for completion
- ⑥ The administrator and another staff member will review each RASP at the time of signing to verify that each form is completed.

Repeat Violation: Yes	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *M.A. Palermo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Michael A. PALERMO</i>	Date <i>12/18/18</i>
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