



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 03 2019

Ms. Monica Shoup
Administrator
Greystone Country Estates, Inc.
424 Delaware Road
Fredonia, Pennsylvania 16124

RE: Greystone Country Estates
License #: 470980

Dear Ms. Shoup:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 18, 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 Choose an item. 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
Violation Report

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

PCH Name: GREYSTONE COUNTRY ESTATES		License Number: 47098
Address: 424 DELAWARE ROAD, FREDONIA, PA 16124		County: Mercer
Administrator: MONICA SHOUP		Region: WEST
Legal Entity Name: GREYSTONE COUNTRY ESTATES INC		
Legal Entity Address: 424 DELAWARE ROAD, FREDONIA, PA 16124		
Certificate(s) of Occupancy C-2 LP 10/17/1997 Labor & Industry		RECEIVED FEB 25 2019 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 37	Waking Staff: 28
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 12/18/2018: Flinner-Alman, Lisa; Gillette, Lori		
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: 45 ✓ Number of Residents Served: 36 ✓ 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: 4 ✓		Number of Residents who: Receive Supplemental Security Income: 4 ✓ Are 60 Years of Age or Older: 36 ✓ Have Mental Illness: 0 ✓ Have an Intellectual Disability: 5 ✓ Have a Mobility Need: 1 ✓ Have a Physical Disability: 1 ✓

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600
 2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

The Care Facility Carbon Monoxide Alarms Standards Act, enacted 6/23/16, requires carbon monoxide alarms to be installed in close proximity of, but not less than 15 feet from, any fossil-fuel burning device or appliance. No carbon monoxide detectors were present in the home in accordance with The Care Facility Carbon Monoxide Alarms Standards Act. The home has a gas stove in the kitchen.

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.

Please see attachment

SEE PAGE 2A OF 9

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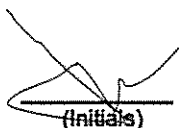
Signature of Legal Entity Representative
 (Required on EVERY Page) *Monica Show*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Show</i>	Date <i>2/19/19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3/1/19
 (Date)

Plan of correction implementation status as of 3/1/19
 (Date)

The above plan of correction was approved by 
 (Initials)

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

February 18, 2019

Regulation 55 Pa. Code 2600

2600.18

A carbon monoxide alarm was purchased on December 20, 2018 and installed on December 21, 2019 using the guidelines of The Care Facility Monoxide Alarms Standards Act.


Thank you,



Monica Shoup, Administrator

cc – please see attachment

Monthly - A designated staff person will test the carbon monoxide detector and ensure it is functional. - JRW 3/1/19



3/1/19

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600
 2600.92 - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

2a. DESCRIPTION OF VIOLATION
 The glass was broken in eight window panes in the 3 foot by 2 foot window located above the rear exterior basement stairwell. Also there was jagged glass around the edges of each of the windows, posing a skin tear 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.

Please see attachment

SEE PAGE 3A OF 9


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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Sharp</i>	Date <i>2/1/19</i>
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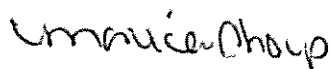
February 18, 2019

Regulation 55 Pa. Code 2600


2600.92

The jagged glass around the edges of the windows were removed and the window was then boarded up. This was done the day of the inspection and approved by the inspector.

Thank you,



Monica Shoup, Administrator

 3/1/19

Violation Report: 47098 - 12/18/2018 - Flinger-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600
 2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION
 At 10:15 a.m., the temperature measured 44 degrees Fahrenheit in the produce refrigerator at the entrance to the dry storage area; at 4:15 p.m., the temperature measured 44 degrees Fahrenheit.

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.

Please see attachment

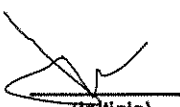
SEE PAGE 4A OF 9

Repeat Violation: Yes	Date(s) of Previous Violation(s):	12/15/2017		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Monica Sharp*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Sharp</i>	Date <i>2/11/19</i>
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February 18, 2019

Regulation 55 Pa. Code 2600

2600.103(f)

A new procedure was implemented for what to do if the temperature of any refrigerator is above 40 degrees. Also a new temperature log was made. Both were placed on each refrigerator in the facility. The new procedure and temperature log are both attached. Staff was trained on this new procedure and new temperature log. Signatures of staff are included.

Thank you,




Monica Shoup, Administrator

cc – please see attachments

Immediately - Temperatures of all refrigerators and freezers will be measured daily and logged on the temperature log. --JRW 3/1/19

Immediately - The administrator or designee will monitor the temperature log at least weekly to ensure food is stored in refrigerators and freezers at safe temperatures. -- JRW 3/1/19



3/1/19

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600
 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION
 According to multiple interviews, during inclement weather, residents stay inside the exit door and not all residents are evacuated to the outdoor fire safe area. The home does not have an interior fire safe area.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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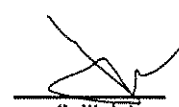
SEE PAGE 5A OF 9

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Shoop</i>	Date <i>2/16/19</i>
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February 18, 2019

Regulation 55 Pa. Code 2600

2600.132(d)

During inclement weather all residents will be made to evacuate the building to the outside fire safe area. General Manager will initial the Personal Care Home approved fire drill record as proof that each resident was evacuated to the outdoor fire safe area during that months fire drill. Fire drill records will then be faxed to DHS for three months.


Thank you,



Monica Shoup, Administrator

Immediately - All staff will be reeducated on fire drill evacuation procedures. -- JRW 3/1/19

All residents evacuated to the outside fire safe area during fire drills conducted on 1/12/19 and 2/21/19. -- JRW 3/1/19



3/1/19

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa

PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600

2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION

The medical evaluation, dated 8/ 8/18, for resident #1 is blank in the area of cognitive functioning.

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.

Please see attachment

SEE PAGE 6A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative

(Required on EVERY Page)

Monica Shoop

Printed Name and Title of Legal Entity Representative

(Required on EVERY Page)

Monica Shoop

Date

2/19/19

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(Date)

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[Signature]
(Initials)

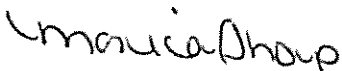
February 19, 2019

Regulation 55 Pa. Code 2600

2600. 141(b)(1)

Medical evaluation forms will be reviewed by the Assistant General Manager and then given to the Administrator to review to assure that medical evaluation was completed accurately. Assistant General Manager and Administrator will both initial the form for confirmation that it was completed correctly. Any errors will be fixed by one of the a for mentioned or if needed returned to the doctor for correction.


Thank you,



Monica Shoup, Administrator

Immediately - The administrator or designee will contact the physician of resident #1 to have cognitive functioning area completed or have a new medical evaluation completed. -- JRW 3/1/19

Immediately - The administrator or designee will review the medical evaluations of all current residents to ensure they are complete. If any information is missing, the resident's physician will be contacted to have the missing information completed, or have a new medical evaluation completed. -- JRW 3/1/19



3/1/19

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

1. REGULATION 55 Pa.Code §2600

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

In the home's outside designated smoking area, there were 3 wrought iron chairs with fabric cushions, which were not made of fire resistant material. There was a metal can containing approximately 16 cigarette butts within 2 inches of one of the chairs.

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.

Please see all attachment

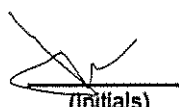
SEE PAGE 7A of 9

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Brown</i>	Date <i>2/11/19</i>
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February 19, 2019

Regulation 55 Pa. Code 2600

2600.144(c)(1)


The three wrought iron chairs and cushions have been removed from the outside designated smoking area. New chairs will be purchased in the spring. No fabric cushions will be used. A picture of the new chairs will be faxed to DHS upon purchase for verification.

Thank you,



Monica Shoup, Administrator

Immediately - A designated staff person will monitor the smoking area to ensure there are no fire hazards, including cans with paper or combustible furniture or cushions. -- JRW 3/1/19



3/1/19

Violation Report: 47098 - 12/18/2018 - Flinner-Alman, Lisa
 PCH Name: GREYSTONE COUNTRY ESTATES

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
 Resident #2 is ordered a B12 injection on the 13th of each month. However, staff initialed the December 2018 medication administration record (MAR) on 12/10/18 as the injection having been administered.

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.

Please see
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SEE PAGE 8A of 9

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Monica Shoup*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Monica Shoup</i>	Date <i>2/19/19</i>
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February 19, 2019

Regulation 55 Pa. Code 2600


2600.187(b)

General Manager spoke with Med Tech Kimberly Taylor from Health Direct Pharmacy Services which is the pharmacy that our facility uses. Kimberly was able to profile the B12 injection, so that it could only be signed for on the day that it is to be given which is the 13th of every other month. The pharmacy number is 724-532-2120 if there is any questions or concerns.

Thank you,



Monica Shoup, Administrator



3/1/19