



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 25 2019

Ms. Joanne Leskowicz
Assistant Corporate Secretary
CCRC-Brandywine, LLC
6737 West Washington Street, Suite 2300
Milwaukee, Wisconsin 53214

RE: The Inn at Freedom Village
25 Freedom Boulevard
West Brandywine, Pennsylvania 19320
License #: 118750

Dear Ms. Leskowicz:

As a result of the Department's Bureau of Human Services Licensing annual inspection on January 3, 2019 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 (relating to Personal Care Homes) 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: 11875 - 01/03/2019 - Chung, Youn Hilo
 PCH Name: THE INN AT FREEDOM VILLAGE

1. REGULATION 55 Pa.Code §2000
 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
 The pre-admission screening for resident #1, admitted to the home on 07/10/2018, was completed on 08/0/2018. The signature of the person completing screening was missing.

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 following is the Plan of Correction for The Inn at Freedom Village regarding the Statement of Deficiencies dated 1/3/19. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is a submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.

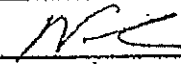
Pre-admission Screening completed for resident #1 with signature. (see attachment A)

An audit was completed of current resident's pre-admission screen to ensure signature of person completing form (see attachment B)

On-going reviews of pre-admission screening paperwork by PCHA or designee prior to admission.

The administrator will ensure all new residents will have a preadmission screening form completed within 30 days of admission. SP 01-17-19

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) Nathaniel Stube, PCHA Date 1/16/19

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

The above plan of correction is approved as of <u>01-17-19</u> (Date)	Plan of correction implementation status as of <u>01-17-19</u> (Date)
The above plan of correction was approved by <u>SP</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: 11876 - 01/03/2019 - Chung, Youn Hie
 PCH Name: THE INN AT FREEDOM VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.231(c) - A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

2a. DESCRIPTION OF VIOLATION
 Resident #1 was admitted to the SDUC on 07/10/2018. The resident's cognitive screening wasn't completed until 07/28/2018.

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.

The following is the Plan of Correction for The Inn at Freedom Village regarding the Statement of Deficiencies dated 1/3/19. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.

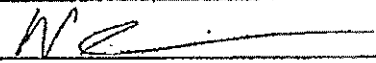
Pre-admission Screening completed for resident #1. (see attachment A)

An audit was completed of current resident's pre-admission screen to ensure a signature by physician or geriatric assessment team was completed within 72 hours of admission (see attachment B)

On-going reviews of pre-admission screening paperwork by PCHA or designee prior to admission.

The administrator or designee will before residents are admitted to SDUC, a physician or geriatric assessment team completes cognitive screening within 72 hours. SP 01-17-19

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Nathaniel Stube, PCHA Date 1/16/19

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