



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 10 2019

Ms. Aleira Harris
Administrator
Salisbury Behavioral Health Inc.
3894 Courtney Street, Suite 100
Bethlehem, Pennsylvania 18017

RE: Salisbury Behavioral Health
1075 Easton Road
Roslyn, Pennsylvania 19001
License #: 128200

Dear Ms. Harris:

As a result of the Department's Bureau of Human Services Licensing annual inspection on March 7, 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 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: SALISBURY BEHAVIORAL HEALTH		Licenso Number: 12820
Address: 1075 EASTON ROAD, ROSLYN, PA 19001		County: Montgomery
Administrator: Mrs. Aleira Harris		Region: SOUTHEAST
Legal Entity Name: SALISBURY BEHAVIORAL HEALTH INC		
Legal Entity Address: 300 WELSH RD BLDG 4 SUITE 100, HORSHAM, PA 19044		
Certificate(s) of Occupancy C-2 LP 06/21/1998 Comm Pa I.&I		APR 04 2019
Staffing Hours		
Resident Support: 0	Total Daily Staff: 14	Working Staff: 11
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 03/07/2019: Carrion, David		
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: 13 ✓ Number of Residents Served: 13 ✓ 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		Number of Residents who: Receive Supplemental Security Income: 6 ✓ Are 60 Years of Age or Older: 3 ✓ Have Mental Illness: 13 ✓ Have an Intellectual Disability: 0 ✓ Have a Mobility Need: 1 ✓ Have a Physical Disability: 13 ✓

Violation Report: 12820 - 03/07/2019 - Carrion, David
 PCH Name: SALISBURY BEHAVIORAL HEALTH

1. REGULATION 55 Pa.Code §2600
 2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:
- (1) Medication self-administration training.
 - (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
 - (3) Care for residents with dementia and cognitive impairments.
 - (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
 - (5) Personal care service needs of the resident.
 - (6) Safe management techniques.
 - (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION
 The annual training provided to direct care staff person A in training year 2018, did not include the topic of Safe Management Techniques.

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.

Direct care staff person A received our "Crisis Prevention Intervention" Training in 2018 which includes "Safe Management Techniques". This training was completed on 8/31/18. I have attached a copy of the staff training sign in sheet.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Alecia Harris</i>	Date <i>4/3/19</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>4/23/19</u> (Date)	Plan of correction implementation status as of <u>4/23/19</u> (Date)
The above plan of correction was approved by <u>AAA</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 12820 - 03/07/2019 - Carrion, David
 PCH Name: SALISBURY BEHAVIORAL HEALTH

1. REGULATION 55 Pa.Code §2600
 2600.05(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:
 (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
 (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
 (3) Resident rights.
 (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
 (5) Falls and accident prevention.
 (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION
 Direct care staff person A, did not receive training in The Older Adult Protective Services Act during training year 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.

Direct care staff person A did receive the "Older Adult Protective Services Act" training in the year 2018. I have attached the staff training sign in sheet dated 1/2/18.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Aleira Harris</i>	Date <i>4-3-19</i>
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Violation Report: 12820 - 03/07/2019 - Carrion, David
 PCH Name: SALISBURY BEHAVIORAL HEALTH

1. REGULATION 55 Pa.Code §2600
 2600.103(f) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION
 On 03/07/2019, at 4:00pm, 7 cans of beef stew with an expiration date of 1/20/19 and 5 cans of chicken breast with an expiration date of 02/05/19, was located in the home's food pantry.

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.

Immediately on 3/7/19 the expired cans were thrown out in the garbage / recycle. I the administrator implemented a monthly disaster food expiration date check. My direct care staff will conduct these checks effective immediately. I the Administrator will review these checks to ensure they are being completed.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Aleira Harris</i>	Date <i>4-3-19</i>
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Violation Report: 12820 - 03/07/2019 - Carrion, David
 PCH Name: SALISBURY BEHAVIORAL HEALTH

1. REGULATION 65 Pa.Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

On 03/07/19, resident #1 was prescribed Metoprolol Succinate ER 25 MG. At the time of the inspection, the home did not have Metoprolol on the medication cart or onsite in the home.

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.

Immediately and moving forward All medication orders will be obtained and on site within 24 hours of being prescribed. Additionally medications will be removed from the MAR and the home upon notification from the prescriber that the medication has been discontinued. The administrator will conduct weekly medication checks to ensure the home is following the directions of the prescriber. This will go into affect immediately.

A-A

Repeat Violation: No	Date(s) of Previous Violation(s):		
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 (Required on EVERY Page) *Aleira Harris*

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