



Sent via e-mail nstube@brookdale.com
July 18, 2019

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

RE: The Gardens at Freedom Village
25 Freedom Boulevard
West Brandywine, Pennsylvania 19320
License #: 126000

Dear Ms. Leskowicz:

As a result of the Department's Bureau of Human Services Licensing inspection on April 10, 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.

Sincerely,

Shawn Parker

Shawn Parker
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *THE GARDENS AT FREEDOM VILLAGE*
 Address: *25 FREEDOM BOULEVARD, WEST BRANDYWINE, PA 19320*
 County: *CHESTER* Region: *SOUTHEAST*

License Number: *126000*

Administrator

Name: *Nathaniel Stube* Phone: *4842882300* Email: *nstube@BROOKDALE.COM*

Legal Entity

Name: *CCRC BRANDYWINE LLC*
 Address: *6737 W WASHINGTON ST SUITE 2300, WI, 53214*

Certificate(s) of Occupancy

Type: *1-1* Date: Issued By:

Staffing Hours

Resident Support Staff: Total Daily Staff: *67* Working Staff: *46*

Inspection

Type: *Partial* BHA Docket #: Notice: *Unannounced*
 Reason: *Incident*

Inspection Dates and Department Representative

04/10/2019 - On-Site: Youn Hie Chung

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *73* Residents Served: *67*

Secured Dementia Care Unit

In Home: Area: Capacity: Residents Served:

Hospice

Current Residents: *x*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *60*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *0* Have Physical Disability: *1*

42b - Abuse

Regulations

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On 04/02/2019, at approximately 7:00am resident # 1 requested that staff member A make her bed. Staff member A reacted by yelling at the resident, tossing items around, and banging on the table. Staff member A told resident # 1 that making her bed wasn't her problem. She had enough beds to make and that someone on night shift should have helped her make her bed. Resident # 1 also stated that staff member A has been mean to her on other occasions. Resident # 1 says dealing with staff member A makes her feel humiliated.

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.)

I have enclosed the Plan of Correction for the above-referenced facility in response to the Statement of Deficiencies. While this document is being submitted as confirmation of the facility's on-going efforts to comply with all statutory and regulatory requirements, it should not be construed as an admission or agreement with the findings and conclusions in the Statement of Deficiencies.


Staff member A was suspended by the PCHA on 4/2/19 upon notification of the allegation. An investigation was initiated by PCHA on 4/2/19. Staff member A was terminated from employment on 4/2/19. (attachment 1)
Abuse training was completed on 4/20/19 by PCHA for current staff. (attachment 2)

The PCHA will continue to monitor customer concerns for allegations of abuse, neglect and exploitation and will report and investigate as per policy. Please see attached.....

Legal Entity Representative

	Nathaniel Stube, PCHA	5/10/19
Signature	Printed Name and Title	Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of	07-17-19 (Date)	Plan of correction implementation status as of	07-17-19 (Date)
The above plan of correction was approved by	 (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	

2600.42(b)

Home did send in verification staff member A was terminated and staff was in-serviced on abuse and abuse reporting on 04-20-19. Administrator or designee will ensure all new staff are trained on residents' rights and mandatory abuse reporting within 40 scheduled working hours in conjunction with regulation 2600.65(b). Also, all staff will be trained annually on residents' rights and the Older Adults Protective Services Act in conjunction with regulation 2600.65(g).

SP 07-17-19

190b - Insulin Injections

Regulations

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

Description of Violation

Staff member B's diabetes patient education program certificate expired 02-18-19. Staff member B administered insulin to residents after the expiration of the certificate.

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.)

I have enclosed the Plan of Correction for the above-referenced facility in response to the Statement of Deficiencies. While this document is being submitted as confirmation of the facility's on-going efforts to comply with all statutory and regulatory requirements, it should not be construed as an admission or agreement with the findings and conclusions in the Statement of Deficiencies.

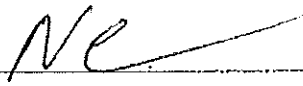
Current med techs Diabetes Patient Administration training records were reviewed by the HWD on 4/10/19.

Diabetes Patient Administration training for current med techs was completed by Certified Diabetes Educator on 4/24/2019. (attachment 3)

The HWD will monitor the med tech Diabetes Patient Administration training quarterly to assure compliance.

Please see attached.....

Legal Entity Representative

	Nathaniel Stube, PCHA	5/10/19
Signature	Printed Name and Title	Date

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2600.190(b)

The administrator or designee will review all staff person training records to ensure all staff persons administering insulin injections meet the requirements of regulation 2600.190b. The administrator or designated staff person will review all medication administration training records as part of the quality management review to ensure all staff persons administering insulin injections continue to meet the qualifications to administer insulin injections.

SP 07-17-19