



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail cmazza@salisb.com
Sent via e-mail aharris@salisb.com
July 27, 2020

Ms. Cynthia Mazza
Vice President/COO
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. Mazza:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on February 10, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Sandra Wooters

Sandra Wooters, MHS, ACG
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: SALISBURY BEHAVIORAL HEALTH

License Number: 12820

Address: 1075 EASTON ROAD,, ROSLYN, PA 19001

County: MONTGOMERY

Region: SOUTHEAST

Administrator

Name: Aleira Harris

Phone: 2158845566

Email: aharris@SALISB.COM

Legal Entity

Name: SALISBURY BEHAVIORAL HEALTH INC

Address: 3894 COURTNEY STREET, SUITE 100, BETHLEHEM, PA, 18017

Certificate(s) of Occupancy

Type: Other

Date: 06/12/1998

Issued By: L&I

Staffing Hours

Resident Support Staff:

Total Daily Staff: 14

Waking Staff: 11

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

02/10/2020 - On-Site: Youn Hie Chung

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 13

Residents Served: 13

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 13

Are 60 Years of Age or Older: 3

Diagnosed with Mental Illness: 13

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 1

Have Physical Disability: 1

3c - Post Current License

Regulations

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On 02/10/2020, a copy of the current license inspection summary issued by the Department was not posted in a conspicuous and public place in the home.

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 2/10/2020 a notice was placed outside the office door of where the license inspection summary is kept. The sign states "The licensing inspection summary report is available upon request in this this office." Everyone has access. Attached is the posted sign.

Legal Entity Representative The office will be available 24 hours per day or the Licensing Inspection Summary will be posted outside of the office, starting immediately. SLW 7.27.2020

Alin Hain
Signature

Aleira HARRIS 2/27/20
Printed Name and Title Administrator Date

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The above plan of correction is approved as of 7/27/2020 (Date) Plan of correction implementation status as of 7/27/2020 (Date)

- Implemented
- Not Implemented

The above plan of correction was approved by slw (Initials)

42s - Privacy

Regulations

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

The home has cameras installed inside the front entrance and at the parking lot under the building used as a designated smoking area. However, the home failed to post a sign indicating video surveillance.

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 2/11/20 signs were posted indicating video surveillance at the front entrance and parking lot under the building where the cameras are. I have attached a picture of posted sign.

Legal Entity Representative

Ali Amin
Signature

Aleira Harris 2/27/20
Administrator Date

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(Date)

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(Initials)

105g - Lint Removal and Duct Cleaning

Regulations

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

On 02/10/2020, there was an accumulation of lint in the lint traps of the home's two dryers. There were no clothes in the dryers at the time.

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 2/10/20 the lint trap in the home inside the dryer were cleaned and emptied. Moving forward each employee will check lint traps at the beginning and end of each shift. The administrator will be enforced and also checking that staff are completing these checks.

Legal Entity Representative

Aleina Harris

Signature

Aleina Harris

Printed Name and Title

Administrator

2/27/20

Date

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107c - Food/Water 3 Day Supply

Regulations

2600.

107.c. The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.

Description of Violation

On 02/10/2020, the home served 13 residents, requiring 39 gallons of emergency drinking water. However, the home had only 30 gallons. The home does not have a contract with a local bottled water supplier that includes 24 hour delivery.

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 2/10/20 the home purchased nine more gallons of emergency drinking water. A plan is in place where staff will do weekly emergency food/water supply checks. The Administrator will ensure these checks are being completed weekly.

Legal Entity Representative

Aleira Harris
Signature

Aleira Harris
Printed Name and Title Administrator
2/27/20
Date

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132f - Alternate Exit Routes

Regulations

2600.
132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The front door and under the house were the only exit routes used during the fire drills held from 03/2019 through 01/2020.

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.)

ON 2/27/20 OUR monthly fire drill was completed and all of the exit routes were used. The fire drills held from 03/2019 through 01/2020 all of the exit routes were used. The front door AND two exits under the house are the only exit routes the home has. During all fire drills completed the Administrator always ensured that all the homes exit routes were used.

Legal Entity Representative On a monthly basis, one of the exits will be blocked during a fire drill, alternating the exits to ensure residents are aware of the alternative exits, starting immediately. SWL 7/27/2020

Alicia Harris
Signature

Aleina Harris
Printed Name and Title Administrator Date 2/27/20

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141a 1-10 Medical Evaluation Information

Regulations

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

The medical evaluation dated 12/17/2019 for resident #1 did not include the ability to self-administer medications.

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 2/10/2020 resident number 1 medical evaluation was updated and included the ability to self-administer medications. After the MA-51 is completed the Care Coordinator will scan a copy for review to the Administrator.

Legal Entity Representative

Aleina Harris
Signature

Aleina Harris 2/27/20
Printed Name and Title Administrator Date

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187a - Medication Record

Regulations

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

- 12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #2 is prescribed Clonazepam 0.5 mg, Fluoxetine HCL 40 mg, Perphenazine 16 mg and 8 mg, and Quetiapine Fumarate 200 mg and 300 mg. However, his medication administration record does not indicate the diagnosis of these medications.

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 2/10/20 Resident #2 Medication Record was updated and does indicate the diagnosis of All resident# 2 medications. Staff will Conduct daily medication checks for All residents. The Administrator will ensure these medication checks are being completed and AN Accurate medication record is being kept.

Legal Entity Representative

[Handwritten Signature]
Signature

Aleira Harris 2/27/20
Printed Name and Title Administrator Date

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224a - Preadmission Screen Form

Regulations

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.

Description of Violation

Resident #3's pre-admission screening form, dated 05/31/2019, does not indicate the level of supervision need.

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 2/10/20 Resident #3 pre-admission screening form was updated and does indicate the level of supervision needed. The Administrator will double check the Pre-admission Screen form is completely and accurately filled out.

Legal Entity Representative

Aleira Harris
Signature

Aleira Harris 2/27/20
Printed Name and Title Administrator Date

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