

Department of Human Services
Bureau of Human Service Licensing

August 9, 2022

[REDACTED], VP /COO
[REDACTED]
[REDACTED]

RE: SALISBURY BEHAVIORAL HEALTH
LLC
2538 GYPSY LANE
CHELTENHAM TOWNSHIP, PA,
19038
LICENSE/COC#: 12834

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/22/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY

Facility Information

Name: *SALISBURY BEHAVIORAL HEALTH LLC* License #: *12834* License Expiration: *07/22/2022*
Address: *2538 GYPSY LANE, CHELTENHAM TOWNSHIP, PA 19038*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: *Andrea Davis-Hosten* Phone: *267-586-3775* Email:
andrea.davis-hosten@rhanet.org; shparker@pa.gov

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *09/09/2003* Issued By: *CWOPA*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *5* Waking Staff: *4*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *06/28/2022*

Inspection Dates and Department Representative

06/22/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *4* Residents Served: *4*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *NA*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *3*
Diagnosed with Mental Illness: *4* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

06/22/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/30/2022*

Inspections / Reviews (*continued*)

08/08/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/18/2022*

08/09/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

20b1 - Financial Records

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 1. The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

Description of Violation

Salisbury Behavioral Health/RHA Services manages the finances for resident #1. However, the home failed to keep a detailed and accurate record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

Plan of Correction

Accept

Immediately on 6/24/2022 the administrator reviewed residents' funds with resident #1. It has dates, amounts of deposits, amount of withdrawals and the current balance. Moving forward the home will continue to provide resident #1 with detailed and accurate record of financial transaction.

Completion Date: 06/24/2022

Document Submission

Implemented

Immediately on 6/24/2022 the administrator reviewed residents' funds with resident #1. It has dates, amounts of deposits, amount of withdrawals and the current balance. Moving forward the home will continue to provide resident #1 with detailed and accurate record of financial transaction.

20b6 - Interest Bearing Account

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 6. If a home is holding more than \$200 for a resident for more than 2 consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.

Description of Violation

Salisbury Behavioral Health/RHA Services held money for resident #1, from 4/30/21 to 5/1/22, during which time the balance of those funds exceeded [REDACTED] for more than 2 consecutive months. The home did not notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally insured financial institution. This does not include security deposits.

Plan of Correction

Accept

Immediately on 6/24/2022 the administrator went over residents #1 financial record with them. Resident #1 already has an interest-bearing account in [REDACTED] name. The administrator went over the cash #1 has on site and the amount in her bank account. Resident #1 received [REDACTED] on 6/24/2022 so [REDACTED] cash on site dose not exceeded [REDACTED]. Moving forward the Lead staff/ Administrator will review the resident financial records with them weekly to ensure the residents are aware of their cash on site and encourage them to spend if they want/need anything.

Completion Date: 07/27/2022

Document Submission

Implemented

Immediately on 6/24/2022 the administrator went over residents #1 financial record with them. Resident #1 already has an interest-bearing account in [REDACTED] name. The administrator went over the cash #1 has on site and the amount in [REDACTED] bank account. Resident #1 received \$37.61 on 6/24/2022 so her cash on site dose not exceeded \$200.00.

20b6 - Interest Bearing Account (continued)

Moving forward the Lead staff/ Administrator will review the resident financial records with them weekly to ensure the residents are aware of their cash on site and encourage them to spend if they want/need anything.

20b8 - Quarterly Account

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 8. The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.

Description of Violation

Salisbury Behavioral Health/RHA Services manages the finances for resident #1. However, they did not provide an accurate itemized account of financial transactions made on resident #1's behalf on a quarterly basis.

Plan of Correction

Accept

Immediately our companies financial management team was contacted and made aware of violation 2600 20.b. Being that the financial department has full access to resident #1 total account. They will be completing the PCH Quarterly financial summary 2600.20(b) form. They are scheduled to come to the site on 7/27/2022 and complete the form. The administrator will ensure a copy of the itemized account shall be kept in the resident's record. Moring forward the financial team will complete this process every three months for all residents we, our representative.

Completion Date: 07/27/2022

Document Submission

Implemented

Immediately our companies financial management team was contacted and made aware of violation 2600 20.b. Being that the financial department has full access to resident #1 total account. They will be completing the PCH Quarterly financial summary 2600.20(b) form. They are scheduled to come to the site on 7/27/2022 and complete the form. The administrator will ensure a copy of the itemized account shall be kept in the resident's record. Moring forward the financial team will complete this process every three months for all residents we, our representative.

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

1. Resident #1 is prescribed Ibuprofen as needed. On 6/22/22, the medication was not available in the home.

2. The home failed to comply with the internal Salisbury medication policy. On 6/22/22, at approximately 12:00pm during the medication audit the Licensing Representative observed that the electronic MAR for resident #1 and resident #2 was signed off for the 8:00pm administration. The Licensing Representative inquired about this, and the home stated that the pills are pre-packed or pulled for the evening shift worker to administer or observe. The Licensing Representative asked what documentation the home had that the evening shift staff person observed resident #1 or #2 taking the medication. The home stated that residents self-administer so they were double documenting and did not have to sign off on the MAR at the time of administration. However, the medication policy documents that the MAR needs to be complete at the time of administration or observation.

185a - Implement Storage Procedures (continued)

The home's policy titled: Medication 701 & Medication Records 702.

Medication policy 701 page 3 - All medication that is administered or observed by staff will be documented according to the Medication Record Policy (see policy 702)

Medication Records Policy 702 – The Medication Administration Record MAR is a legal document that reflects the administration of prescribed medications by the staff or the observation of self-administration of prescribed medications by consumers.

Plan of Correction

Accept

Immediately on 7/7/2022 staff was trained/Educated on 185.a and 187.b violation. The administrator reviewed with staff the procedures for safe storage and information recorded at the time the medication is administered. Moving forward medication checks will be completed weekly by staff and reviewed monthly by administration.

Completion Date: 07/07/2022

Document Submission

Implemented

Immediately on 7/7/2022 staff was trained/Educated on 185.a and 187.b violation. The administrator reviewed with staff the procedures for safe storage and information recorded at the time the medication is administered. Moving forward medication checks will be completed weekly by staff and reviewed monthly by administration.

187b - Date/Time of Medication Admin.

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

- On 6/22/22, at approximately 12PM during the medication audit the Licensing Representative observed that the electronic MAR for resident #1 and resident #2 was signed off for the 8PM administration. The Licensing Representative inquired about this, and the home stated that the pills are pre-packed or pulled for the evening shift worker to administer or observe. The Licensing Representative asked what documentation the home had to verify and document that the evening shift worker observed resident #1 and 2 taking the medication or that the resident took the medication. The home stated that the residents self-administer, however, the home's medication policy documents that the MAR needs to be complete at the time of administration or observation.
- On 6/22/22 at 12PM, resident #1's MAR was signed before the actual time of the medication administration or observation. The MAR was signed off on 6/22/22 for 8PM medications: signed off was the 8PM [REDACTED], [REDACTED]. Also, the MAR was signed off on 6/22/22 for 3PM [REDACTED].
- On 6/22/22, resident #2's MAR was signed before the actual time of the medication administration or observation. The MAR was signed off on 6/22/22 for 8PM medications: [REDACTED], [REDACTED], 8PM [REDACTED]. Also, the MAR was signed off on 6/22/22 for 9PM medications. [REDACTED].
- The home has a paper MAR also to match the electronic MAR and stated that the medication administration/observation is to be signed off by the evening staff person on the paper MAR, but that was not done either. Based on the interviews, the home has been routinely doing this practice of not signing off the MAR at the time of administration/observation. The licensing representative was able to observe this practice based on the 6/22/22 MAR signed off at 12PM before the evening medications were administered or observed.

Plan of Correction

Accept

Immediately on 7/7/2022 staff was trained/Educated on 185.a and 187.b violation. The administrator reviewed

187b - Date/Time of Medication Admin. (continued)

with staff the procedures for safe storage and information recorded at the time medication is administered. Moving forward medication check will be completed weekly by staff and reviewed monthly by administrator.

Completion Date: 07/07/2022

Document Submission**Implemented**

Immediately on 7/7/2022 staff was trained/Educated on 185.a and 187.b violation. The administrator reviewed with staff the procedures for safe storage and information recorded at the time medication is administered. Moving forward medication check will be completed weekly by staff and reviewed monthly by administrator.