

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

August 21, 2024

[REDACTED], ADMINISTRATOR
EMERITUS CORPORATION
[REDACTED]

RE: BROOKDALE BLOOMSBURG
420 SHAFFER ROAD
BLOOMSBURG, PA, 17815
LICENSE/COC#: 21120

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/17/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *BROOKDALE BLOOMSBURG* License #: *21120* License Expiration: *07/10/2025*
 Address: *420 SHAFFER ROAD, BLOOMSBURG, PA 17815*
 County: *COLUMBIA* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED]

Legal Entity

Name: *EMERITUS CORPORATION*
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *10/17/1996* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *41* Waking Staff: *31*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *07/17/2024*

Inspection Dates and Department Representative

07/17/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *67* Residents Served: *41*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *41*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *2*

Inspections / Reviews

07/17/2024 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/12/2024*

08/12/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *08/16/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/19/2024*

Inspections / Reviews *(continued)*

08/21/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/16/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Resident 2 reported to staff member that they were touched inappropriately by Resident 1 on [REDACTED] and it was not reported to DHS until [REDACTED].

Plan of Correction

Accept [REDACTED] - 08/12/2024)

[REDACTED] - Incident was reported to the Department when notified by the resident.

7/5/2024- The Executive Director (ED) reviewed regulations 2600.16 (c) and 2600.15 with community managers at stand-up meeting, stressing the importance of notifying the ED or clinical staff immediately with any suspected abuse allegations.

8/14/24- Appropriate clinical staff will be re-trained by the Executive Director (ED) on the community policy regarding suspected abuse and timely notification to the Department.

Ongoing- To assist with compliance, the ED or designee will review any potential incidents as they occur for 1 month starting August 1, 2024 through August 31, 2024.

Monthly reviews will be then be completed thereafter by the ED or designee to verify and to determine if any further action is warranted starting September 1, 2024.

ED will determine if any further action is warranted based on the reviews.

Supporting Documentation: record of 8/14/24 staff training

Licensee’s Proposed overall Completion Date: 8/14/24

Licensee's Proposed Overall Completion Date: 08/14/2024

Implemented [REDACTED] - 08/16/2024)

42b - Abuse

2. Requirements

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

Resident 2 was touched inappropriately against their wishes by Resident 1. At some point in mid-June, Resident 1 touched Resident 2’s [REDACTED] without their consent.

Plan of Correction

Accept [REDACTED] 08/12/2024)

[REDACTED] - Incident was reported to the Department when notified by the resident. Resident 2 resides in the Personal Care Unit. Resident 2 did tell resident 1 to stop touching [REDACTED] and moved away from [REDACTED]. Resident 1 did stop when told to do so by Resident 2. Resident 2 was reminded by the ED to report any situations of concern immediately to the Executive Director (ED) or clinical staff.

7/19/2024-The ED reviewed regulation 2600.42(b) with managers at the standup meeting. During report that same day, clinical associates were re-educated on their responsibility to observe resident interactions, interceding immediately to protect residents, and notify ED or designee for any follow-up actions.

7/24/2024- Resident 1 is no longer a resident in the community following a verbal 30-day notice to the resident

42b - Abuse (continued)

and POA.

8/14/2024- Scheduled re-training for appropriate clinical staff at monthly staff meeting by the ED on the community policy regarding reporting suspected abuse.

Ongoing- To assist with compliance, the ED or designee will review any potential incidents as they occur for 1 month starting August 1, 2024, through August 31, 2024.

Monthly reviews will then be completed thereafter by the ED or designee to verify compliance and to determine if any further action is warranted starting September 1, 2024. 2024.

ED will determine if any further action is warranted based on the reviews.

Licensee's Proposed overall Completion Date: 8/14/24

Supporting Documentation: record of staff training

Licensee's Proposed Overall Completion Date: 08/14/2024

Implemented () - 08/21/2024)

228b - Discharge or Transfer

3. Requirements

2600.

228.b. If the home initiates a discharge or transfer of a resident, or if the legal entity chooses to close the home, the home shall provide a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the discharge or transfer. This shall be stipulated in the resident-home contract. A 30-day advance written notice is not required if a delay in discharge or transfer would jeopardize the health, safety or well-being of the resident or others in the home, as certified by a physician or the Department. This may occur when the resident needs psychiatric or long-term care or is abused in the home, or the Department initiates closure of the home.

Description of Violation

The facility did not give a written 30-day notice as stated in their contract on page 7 Article 4 Section C3. The facility only gave a verbal notice to Resident 1 on ()

Plan of Correction

Accept () - 08/12/2024)

7/5/2024-ED retrained the appropriate managers regarding the community policy on community-initiated discharges.

7/5/2024- ED reviewed records for any other residents with community-initiated discharges and records were found in compliance with none issued.

7/17/2024- The ED and Business Office Manager (BOM) reviewed both the community contract and regulation 2600.228(b) with Resident 1 and the POA.

7/17/2024 and ongoing- ED and BOM will both review any written 30-day notices, when determined necessary, to verify community policy is followed. This will afford the resident time to identify and relocate to a new home.

7/17/2024- The ED and or BOM will review any documentation for those residents who require advance written notice for 2 months and then as indicated.

7/24/2024- Resident 1 is no longer a resident in the community following a verbal 30-day notice to the resident and POA.

The ED will review and determine if any further action is warranted based on the reviews.

Licensee's Proposed overall Completion Date: 7/17/2024

Supporting Documentation: training attendance record

Licensee's Proposed Overall Completion Date: 08/12/2024

228b Discharge or Transfer *(continued)*

Implemented [REDACTED] - 08/16/2024)