



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

MAILING DATE: July 12, 2013
Sent Via email to: bethanyslc@aol.com


Ms. Myrna Vogel, Administrator
Bethany Village, Inc.
Bethany Village
150 Noble Lane
Bethany, Pennsylvania 18431

Dear Ms. Vogel

As a result of the Department of Public Welfare's (Department) licensing inspection on May 28, 2013 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations 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. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.

Sincerely,


Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Violation Report

Violation Report:
PCH Name: BETHANY VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION
 On 5/4/13, there was an allegation of verbal abuse against resident #1. The home did not report the allegation until 5/6/13 to the Wayne County Area on Aging.

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.

Bethany Village immediately reports allegations of suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act and 6 PA Code Sections 15.21-15.27 and complies with the requirements regarding restrictions on staff persons.

Two housekeeping employees witnessed an allegation of verbal abuse on May 4, 2013 but failed to report these allegations to their supervisor until May 5, 2013. The Supervisor did not report the allegation to a charge person or Administrative staff person until the morning of May 6, 2013 at which time the home immediately reported the allegation to both the Wayne County Aging office and the Department of Public Welfare licensing office.

All staff members immediately involved in the witnessing of the allegation and the failure to immediately report the allegation have been re-inserviced on the proper procedures of reporting allegations of abuse.

All staff members will be re-inserviced on abuse reporting and Resident's Rights at our next inservice scheduled for 7/18/13.

* The Administrator will be responsible for continued compliance with this regulation.

Completion Date: July 18, 2013

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Christine Zelosko</i>	Date <i>7/2/13</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>7/11/13</u> (Date)	Plan of correction implementation status as of <u>7/11/13</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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

Violation Report:
PCH Name: BETHANY VILLAGE

1. REGULATION 55 Pa.Code §2600
 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 section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION
 On 5/4/13, there was an allegation of verbal abuse against resident #1 by staff person A. The home did not report the incident to the Department until 5/6/13.

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.

Bethany Village reports all incidents or conditions to the Department's personal care 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 section 2600.15.

Two housekeeping employees witnessed an allegation of verbal abuse on May 4, 2013 but failed to report these allegations to their supervisor until May 5, 2013. The Supervisor did not report the allegation to a charge person or Administrative staff person until the morning of May 6, 2013 at which time the home immediately reported the allegation to both the Wayne County Aging office and the Department of Public Welfare licensing office.

All staff members immediately involved in the witnessing of the allegation and the failure to immediately report the allegation have been re-inserviced on the proper procedures of reporting allegations of abuse.

All staff members will be re-inserviced on abuse reporting and Resident's Rights at our next inservice scheduled July 18, 2013..

✦ The Administrator will be responsible for continued compliance with this regulation.

Completion Date: July 18, 2013

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Christine Zelosko</i>	Date <i>7/2/13</i>
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Violation Report:
PCH Name: BETHANY VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION
 It was reported through staff interviews that on 5/4/13 at approximately 3:00 pm staff person A stated, "Well, we treat residents like monkeys here" in the presence of resident #1; staff person A repeatedly called resident #1 a bitter old lady or woman while filing the resident's fingernails; when resident #1 raised his/her arm after hearing these comments, staff person A pointed to his/her chin and stated to resident #1, "You want to hit me, go ahead, right here"; staff person A stuck his/her tongue out at resident #1; and while holding an emery board near the forehead of resident #1, staff person A told resident #1 s/he was going to "smack" resident #1 in the head with it.
 On 5/28/13 staff person A reported to the Department Representative that on 5/4/13 s/he stated to resident #1 s/he had to finish filing resident #1's nails because "resident #1 couldn't use them like little weapons".

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.

All residents of Bethany Village are treated with dignity and respect.

Upon receiving the complaint of an allegation of abuse, all involved parties (witnesses and alleged verbal abuser) were immediately contacted and interviewed. Alleged abuser stated, "I did not abuse her, I just told her she was a bitter old lady". Employee was informed that this is verbal abuse and was immediately terminated.

All staff members will be re-inserviced on the definition of both physical and verbal abuse and Resident's Rights at our next inservice scheduled on 7/18/13.

* The Administrator will be responsible for continued compliance with this regulation.

Completion Date: July 18, 2013

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Christine Zelasko* Date *7/2/13*

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Violation Report:

PCH Name: BETHANY VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.130(e) - If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.

2a. DESCRIPTION OF VIOLATION

A signaling device is not located in the bathroom adjacent to resident #2's room. Resident #2 is an individual with a hearing deficit who is unable to hear the fire alarm when her/his hearing aids are removed.

A signaling device is not located in the bathroom adjacent to resident #3's room. Resident #3 is an individual with a hearing deficit and is unable to hear the fire alarm.

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.

Bethany Village utilizes and tests signaling devices approved by a Fire Safety expert so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.

A signaling device will be installed in the bathrooms adjacent to resident #2 & #3's rooms.

This regulation will be reviewed at the monthly Quality Management meeting.

- ✓ The Environmental Services Director will be responsible for continued compliance with this regulation.

Completion Date: August 15, 2013

* The Administrator shall be responsible for monitoring and ongoing compliance
[Signature]
 7/11/13

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Christine Zeloska Date 7/12/13

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