



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]
MAILING DATE: March 25, 2014

Mr. Edmund J. Abdo, Jr., Executive Director
Northeast Counseling Services
130 West Washington Street
Nanticoke, Pennsylvania 18634

RE: Conyngham Care Center
63 South Hunter Highway, PO Box 473
Drums, Pennsylvania 18222
License: #221750

Dear Mr. Abdo:

As a result of the Department of Public Welfare's licensing inspection on February 26, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Michele Moskalczyk".

Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 22175 - 02/26/2014 - Yellenic, Cindy
 PCH Name: CONYNGHAM CARE CENTER

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

2a. DESCRIPTION OF VIOLATION

Resident #1, has daily episodes of anger, verbal outbursts, inappropriate sexual behavior, and/or physical episodes. These behaviors have the other residents of the home afraid of their dwelling, fearful to be in the same common area room with Resident #1, and emotionally frustrated and upset to the point of tears. Resident #1 presents a lack of dignity and respect for the other residents living in the facility.

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.

Resident #1's treatment team (including I.D. services and M.H. Case Management) is in the process of actively pursuing alternate placement for Resident #1. Until the alternate placement has been achieved, a plan for extra help to manage Resident #1's behaviors has been put into place. This involves a schedule consisting of Blended Case Managers from Northeast Counseling and/or Care Givers from Care Givers America working at the PCH during the evening hours when Resident #1 typically has difficulties. The extra help is indicated on the PCH staff schedule, and will work directly with Resident #1 for the entirety of their scheduled shift in order to assist Resident #1 in maintaining appropriate behavior and avoiding behaviors which might negatively impact other residents. Also Resident #1 continues to attend Program at Northeast Counseling Services and was more recently approved for more days at a more intensive program (3 days/week at partial hospitalization program). The Mobile Crisis Team from Northeast Counseling as well as Helpline will continue to be utilized as appropriate. Furthermore, in case of any other difficulties that exceed the capabilities of the Extra Help and the B.C.M. on call, the Diversionary Unit located at Wilkes-Barre General Hospital will be utilized as a crisis management resource. These measures will be upheld until Resident #1 departs from the PCH to a more appropriate permanent residence. Administrator will ensure compliance to ensure the safety and comfort of other residents at PCH.

ATTACHMENT A – EMPLOYEE SCHEDULES WITH EXTRA HELP DOCUMENTED

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Richard A. Vahey*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Richard A. Vahey Director c.c.c.</i>	Date <i>3/20/14</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>3/25/14</u> (Date)	Plan of correction implementation status as of <u>3/25/14</u> (Date)
The above plan of correction was approved by <u><i>M</i></u> (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: 22175 - 02/26/2014 - Yellenic, Cindy
 PCH Name: CONYNGHAM CARE CENTER

1. REGULATION 55 Pa.Code §2600

2600.201 - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself/herself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

2a. DESCRIPTION OF VIOLATION

Resident #1, has daily episodes of anger, verbal outbursts, inappropriate sexual behavior, and / or physical episodes. These behaviors have the other residents of the home afraid of their dwelling, fearful to be in the same common area room with Resident #1. The home has not implemented positive interventions to modify or eliminate the behaviors. Staff have been instructed to speak calmly to Resident #1, which has not been successful.

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 PCH staff have been refreshed on positive interventions that can be used to safely manage the problematic behaviors of Resident #1. These include positive interventions such as: encouraging Resident #1 to seek positive outlets to redirect energy, encouraging Resident #1 to rethink plans when impaired judgment is displayed, use of coping skills learned/developed in therapy, utilizing the skills Resident #1 has learned at Anger Management at Northeast Counseling, calmly repeating/clarifying instructions as needed and encouraging Resident #1 to come to staff regarding needs and concerns. Resident #1's list of coping skills is readily available to staff and Resident #1. Staff will reinforce positive behaviors with praise. When Resident #1's behaviors escalate past the point of positive interventions by PCH staff, outside assistance to safely manage behaviors will be utilized— namely the B.C.M. on call and Mobile Crisis Team. Direct care extra help (from CareGivers America) will cover shifts with Resident #1 during the times of day when the behaviors have been most prevalent. Helpline/Emergency Services and the Diversionary Unit at Wilkes-Barre General Hospital will be utilized where appropriate.

* Administrator will ensure compliance with these measures.

ATTACHMENT B – RESIDENT #1 COPING SKILLS

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Richard A. Vahey</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Richard A. Vahey Director C.C.C.</i>			Date <i>3/20/14</i>
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Violation Report: 22175 - 02/26/2014 - Yellenic, Cindy
 PCH Name: CONYNGHAM CARE CENTER

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

The support plan for Resident #1, dated 6/7/13, has not been updated since 10-29-13 with all of the physical, emotional, and verbal happenings of this resident. The resident's support plan does not address how the needs of this resident will be met and what service organizations can provide additional support for this resident.

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.

The RASP for Resident #1 has been updated with all applicable changes to Resident #1's behaviors and detailing the management of these behaviors. Available supports have been updated to include Diversionary Unit and the Onset of Caregiver services. It will apply until the resident's departure from the PCH or any possible significant change. Administrator will regularly review and ensure that the RASP is kept up to date and relevant.

ATTACHMENT C – NEW RASP

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Richard A. Vahey*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Richard A. Vahey Director C.C.C.* Date *3/20/14*

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