



**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: September 9, 2014**

Ms. Stephanie Cheripka, Administrator  
The Palms at O'Neil, Inc.  
1 Glenshire Lane  
McKeesport, Pennsylvania 15132

RE: The Palms at O'Neil  
#439640

Dear Ms. Cheripka:

As a result of the Department of Public Welfare's licensing inspection on July 9, 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.

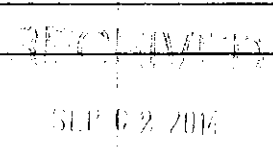
Sincerely,

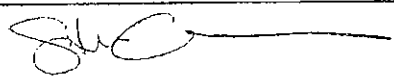
A handwritten signature in black ink, appearing to read "Janine Wenzig". The signature is written in a cursive style with a long, sweeping tail that extends to the right.

Janine Wenzig  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: THE PALMS AT O NEIL		License Number: 43964
Address: 1 GLENSHIRE LANE, MCKEESPORT, PA 15132		County: Allegheny
Administrator: Stephnaie Cheripka		Region: WEST
Legal Entity Name: THE PALMS AT O NEIL INC		
Legal Entity Address: 1 GLENSHIRE LANE, MCKEESPORT, PA 15132		
Certificate(s) of Occupancy I-1 10/22/2014 City of MeKeesport		
Staffing Hours Resident Support: 0 Total Daily Staff: 118		Waking Staff: 89
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 07/09/2014: Miller-Linhart, Alden		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 115 Number of Residents Served: 89 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 39	Number of Residents who: Receive Supplemental Security Income: 10 Are 60 Years of Age or Older: 84 Have Mental Illness: 6 Have an Intellectual Disability: 4 Have a Mobility Need: 29 Have a Physical Disability: 1	



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Violation Report: 43964 - 07/09/2014 - Miller-Linhart, Aiden  
PCH Name: THE PALMS AT O NEIL

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

Division of Senior and Disability Services  
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

Resident #1 is diagnosed with dementia and has periods of agitation. On 7/7/14, the home was notified that a video of resident #1 was posted on an internet social networking site. The video showed resident #1 being teased and laughed at by staff persons A and B who gave her a towel and encouraged her to use it to hit them. This incident was filmed by staff person C.

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.

Staff member A, B, and C completed training upon hire of the following; The Confidentiality of Information Acknowledgement, Act 13 Acknowledgment, Resident Rights, and Mandatory Reporting of Abuse and Neglect Under Older Adult Protective Service Act. These staff members also completed additional annual training regarding dealing with residents with dementia and were aware and educated of the cell phone policy. Please see attached documentation. Staff members A, B, and C were aware and educated of resident rights and OAPSA. All three staff members had no criminal background record upon hire. Unfortunately, the home could not have prevented this incident as it was in compliance with educating staff members upon hiring of resident rights. The home did suspend all three staff members immediately after discovering this video and will dismiss from employment once the investigation is complete by all parties.

The home did take extra steps to re-educate the entire staff of awareness of resident's rights and the cell phone policy. The staff also signed their awareness of the home's zero tolerance for any video/recording/filming/posting/photographing/etc; of any resident or employee with any social media or device unless approved by administration. All of this training was completed at the start of the investigation. Please see attached documentation. The home will continue to educate new employees of resident's rights upon hire and re-educate current employees of resident's rights as required by DPW regulations.

This concludes the homes statement, anything else added is not a part of TPAO Plan of Correction.

\* unacceptable portion  
of plan  
9/5/14

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)      Stephanie Cheripka      Date      08/29/2014

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 9/5/14  
(Date)

Plan of correction implementation status as of 9/5/14  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 43964 - 07/09/2014 - Miller-Linhart, Alden  
 PCH Name: THE PALMS AT O NEIL

1. REGULATION 55 Pa.Code §2600

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.

2a. DESCRIPTION OF VIOLATION

Resident #1 is diagnosed with dementia and has periods of agitation. On 7/7/14, the home was notified that a video of resident #1 was posted on an internet social networking site. The video showed resident #1 being teased and laughed at by staff persons A and B who gave her a towel and encouraged her to use it to hit them. This incident was filmed by staff person C.

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This concludes the homes statement, anything else added is not a part of TPAO Plan of Correction.



*\* unacceptable portion of plan*  
*JR*  
*9/5/14*

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Stephanie Cheripka      Date 08/29/2014

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>9/5/14</u> (Date)	Plan of correction implementation status as of <u>9/5/14</u> (Date)
The above plan of correction was approved by  (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