



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: June 10, 2015

Mr. James J. Cox, CEO
Paramount Senior Living at Peters Township, LLC
Paramount Senior Living at Peters Township
240 Cedar Hill Drive
McMurray, Pennsylvania 15317

RE: Paramount Senior Living
at Peters Township
#443460

Dear Mr. Cox:

As a result of the Department of Human Services' licensing inspection on September 16, 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 "Jon Kimberland".

Jon Kimberland
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

| | | |
|--|--------------------------------------|--|
| PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP | | License Number: 44346 |
| Address: 240 CEDAR HILL DRIVE, MCMURRAY, PA 15317 | | County: Washington |
| Administrator: Andin Ross Mayola | RECEIVED MAY 18 2015 | Region: WEST |
| Legal Entity Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP LLC | | |
| Legal Entity Address: 240 CEDAR HILL DRIVE, MCMURRAY, PA 15317 | | WEST REGION FIELD OFFICE Human Services Licensing |
| Certificate(s) of Occupancy | | |
| I-1 11/16/2011 Peters Township | I-2 11/16/2011 Peters township | Other 11/16/2011 Peters Township |
| Staffing Hours | | |
| Resident Support: N/A | Total Daily Staff: 102 | Waking Staff: 77 |
| Type of Inspection: Partial | BHA Docket Number: | Notice: Unannounced |
| Reason(s) for Inspection(s) | | |
| Incident | | |
| On-Site Inspections Dates and Department Representatives On-Site | | |
| 09/16/2014: Georgoulis, Karen | | |
| Off-Site Inspection Dates and Inspectors, if Applicable | | |
| 09/16/2014: Georgoulis, Karen | | |
| Other Details | | |
| Partial or Full Triggers: | | Random Indicators: |
| Resident Demographic Data as of Inspection Dates | | |
| Licensed Capacity: 125 Number of Residents Served: 67 Secured Dementia Care Unit in Home: Yes Area: SCDU Secured Dementia Unit Capacity, if Applicable: 28 Number of Residents Served in Secured Dementia Care Unit, if applicable: 26 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 8 | | Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 93 Have Mental Illness: 2 Have an Intellectual Disability: 0 Have a Mobility Need: 35 Have a Physical Disability: 4 |

RECEIVED

Violation Report:
PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP

1. REGULATION 55 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.
MAY 18 2015
WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION
During the last week of August 2014, staff person A was toileting resident #1. While providing toileting care staff person A stated "you stink" to the resident tow times.
On 9/13/14 at approximately 8:30 a.m., staff person A and staff person B were assisting resident #1 with dressing. While providing care to resident #1 staff person A stated the resident "is a pain in my ass, I don't like this resident." Resident #1 was very embarrassed and humiliated by the comment. Staff person A then pushed resident #1 to the dining area in a wheelchair in a very aggressive manner, causing the wheelchair to bang into other residents chairs and tables. Resident #1 was visibly upset crying and shaking was fearful of staff person A.

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.

POC for violation 2600.42(c)

Staff person A was immediately taken off of the nursing floor where resident resides and sent home. Staff person A did not return to the facility and was terminated on September 16, 2014.

An in-service was held on abuse and neglect in December, 2014. See sign in sheet and informational packet.

An additional in-service is to be held on respect and dignity the week of May 18, 2015. See page on dignity and respect.

For the next three months, beginning the week of May 18, 2015, on a daily basis DON/Designee will meet with staff regarding resident dignity and respect concerns. Staff members will sign the dignity and respect communication sheet and note if there are any concern. See dignity and respect communication log.

By 7/1/15 - The administrator will privately interview at least three residents a week for three months and biannually thereafter to ensure residents are treated with dignity and respect. Documentation of interviews will be kept.

6-8-15

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

Signature of Legal Entity Representative (Required on EVERY Page) *Ross Maola*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *ROSS MAOLA EXEC. DIR* Date *5-14-15*

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

| | |
|--|---|
| The above plan of correction is approved as of <u>6-8-15</u> (Date) | Plan of correction implementation status as of <u>6-8-15</u> (Date) |
| The above plan of correction was approved by <u>K</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 |