



CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE:

DEC 29 2014

Ms. Daniella Pantal
Pennswood Village
1382 Newtown-Langhorne Road
Newtown, Pennsylvania 18940

RE: Pennswood Village Personal Care Home
Certificate #: 126750

Dear Ms. Pantal:

As a result of the Department of Public Welfare's licensing inspection on 10/01/14 and 10/09/14 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 "Patricia Adams", written in a cursive style.

Patricia Adams
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME		License Number: 126750
Address: 1382 NEWTOWN LANGHORNE ROAD, NEWTOWN, PA 18940		County: Bucks
Administrator: Daniella Pantal		Region: SOUTHEAST
Legal Entity Name: PENNSWOOD VILLAGE		
Legal Entity Address: 1382 NEWTOWN-LANGHORNE ROAD, NEWTOWN, PA 18940		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 37	Waking Staff: 28
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Incident		
On-Site Inspections Dates and Department Representatives On-Site		
09/25/2014: Keppel, Autumn; Colon, Lissette		
Off-Site Inspection Dates and Inspectors, if Applicable		
10/01/2014: Keppel, Autumn 10/09/2014: Keppel, Autumn		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 41 Number of Residents Served: 37 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: 2 Number of Hospice Residents in past year: 1	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 37 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: Have a Physical Disability: 0	

Violation Report: 12675 - 09/26/2014 - Keppel, Autumn
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

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 9/5/14, an allegation of abuse against Resident #1 and Resident #2 was reported to Staff Member A. The home did not report the allegation to the local Area Agency on Aging or the State Department of Aging until 9/8/14.

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.

2600.15(a)


The home's abuse policy has been revised effective September 29th 2014. The current policy addresses the need to report such allegations immediately. See attached. Moving forward the administrator or designee will report such allegations immediately. The home is in compliance with regulation 2600.15(a).

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Daniella Pantaleo</i>	Date <i>11/12/14</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>11/26/14</u> (Date) The above plan of correction was approved by  (Initials)	Plan of correction implementation status as of <u>11/26/14</u> (Date) <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
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Violation Report: 12675 - 09/25/2014 - Keppel, Autumn
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.15(b) - If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

2a. DESCRIPTION OF VIOLATION
 On 9/6/14, an allegation of abuse was made against Staff Person B regarding Resident #1 and Resident #2. The home did not develop and implement a plan of supervision or suspend the staff member until 9/8/14.

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.

2600.15(b)

The home's abuse policy has been revised effective September 29th 2014. The current policy addresses the need to suspend alleged abuser/staff person immediately pending investigation. See attached. Moving forward the administrator or designee will report suspend alleged abuser/staff person immediately pending investigation. The home is in compliance with regulation 2600.15(b).

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Daniella Pantalei*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Daniella Pantalei* Date *11/12/14*

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Violation Report: 12876 - 09/26/2014 - Keppel, Autumn
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.15(c) - The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

2a. DESCRIPTION OF VIOLATION
 On 9/8/14, an allegation of abuse was made against Staff Person B regarding Resident #1 and Resident #2. The home did not submit a plan of supervision or notice of suspension to the Department until 9/8/14. Staff Member B returned to work on 9/9/14 without an approved plan of supervision.

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.

2600.15(c)

The home's abuse policy has been revised effective September 29th 2014. The current policy addresses the need to notify the state immediately as well as submit a plan of supervision for approval. See attached. Moving forward the administrator or designee will submit a plan of supervision for approval immediately. The home is in compliance with regulation 2600.15(a).

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Daniella Pantale</i>	Date <i>11/12/14</i>
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Violation Report: 12675 - 09/25/2014 - Keppei, Autumn	
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME	
<p>1. REGULATION 56 Pa.Code §2600 2600.16(b) - The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.</p>	
<p>2a. DESCRIPTION OF VIOLATION -The home's written policy and procedure on abuse does not address the procedures for reporting allegations of abuse to the Department. -The home's written policy and procedure on abuse incorrectly addresses the time frame for reporting abuse to the local Area Agency on Aging. According to the policy, an oral report is made to AAA if, after a thorough onsite investigation, a credible allegation of abuse exists.</p>	
<p>3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i></p> <p>2600.16(b)</p> <p>The home's abuse policy has been revised effective September 29th 2014. The current policy is in compliance with regulation: 2600.15(a), 2600.15(b) and 2600.15(c). See attached. Moving forward the administrator or designee will implement the policy on abuse allegation. The home is in compliance with regulation 2600.16(b).</p>	
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