



**pennsylvania**

DEPARTMENT OF HUMAN SERVICES

Sent via email to: [REDACTED]

MAILING DATE: August 18, 2015

Ms. Susan C. Blue, President/CEO  
Community Services Group Inc.  
320 Highland Drive, P.O. Box 597  
Mountville, Pennsylvania 17554

RE: Community Services Group  
532 West Saylor Street  
Atlas, Pennsylvania 17851  
License: #208130

Dear Ms. Blue:

As a result of the Department of Human Services' licensing inspection on May 20, 2015 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,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

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

PCH Name: COMMUNITY SERVICES GROUP		License Number: 20813
Address: 532 W. SAYLOR STREET, ATLAS, PA 17851		County: Northumberland
Administrator: DONNA GRAEFF , MARY STEFANOWICZ		Region: NORTHEAST
Legal Entity Name: COMMUNITY SERVICES GROUP INC.		
Legal Entity Address: P.O. BOX 597, MOUNTVILLE, PA 17554		
<b>Certificate(s) of Occupancy</b> C-2 LP I-1 08/30/2001 10/16/2007 LABOR AND INDUSTRY MOUNT CARMEL TWP.		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 21	Waking Staff: 16
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 05/20/2015: Dumas, Gerald		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b> 05/21/2015: Dumas, Gerald 06/05/2015: Dumas, Gerald 06/12/2015: Dumas, Gerald 06/19/2015: Dumas, Gerald 06/26/2015: Dumas, Gerald		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 20	<b>Number of Residents who:</b>	
Number of Residents Served: 20	Receive Supplemental Security Income: 20	
Secured Dementia Care Unit In Home: No	Are 60 Years of Age or Older: 11	
Area:	Have Mental Illness: 20	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 1	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 1	
Number of Current Hospice Residents: 0	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 0		

*Leah Gillespie*      *[Signature]*      7/29/15

Violation Report: 20813 - 05/20/2015 - Dumas, Gerald  
 PCH Name: COMMUNITY SERVICES GROUP

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

2a. DESCRIPTION OF VIOLATION

Staff witness statements and telephone interviews indicated that former Staff Person A had stated directly to resident # 1 "you can't have anything more to drink if you keep peeing your pants." Another staff statement indicated former Staff Person A is "harsh and often rude ways interacting and speaking to residents."

Additionally, the home's internal investigation revealed that former Staff Person A "would not get resident # 2 up for a snack, she/he (Staff Person A) just lets him lay in bed because she/he (Staff Person A) does not want to deal with him."

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.*

A resident shall be treated with dignity and respect 2600.42(c). Staff witness statements and telephone interviews indicated that former staff person A had stated directly to resident #1 "you can't have anything more to drink if you keep peeing your pants". Another staff statement indicated former staff person A is "harsh and often rude ways interacting and speaking to residents". Additionally, the home's internal investigation revealed that former staff person A "would not get resident #2 up for a snack, she/he (staff person A) just lets him lay in bed because she/he (staff person A) does not want to deal with him". To prevent future incidents, the management team will be including the topic of resident rights within the monthly staff meeting, starting in Aug 2015, as well as submitting a weekly email addressing this and similar issues as a reminder to all staff to demonstrate respectful behavior to preserve the dignity of all residents. Former staff person A was put on suspension pending an internal investigation and was terminated upon the conclusion of said investigation as this right was violated by former staff person A.

*Adm will also review this violation report & Plan of correction will be review w/ all others during the Quality Management Plan Meeting annually (or more frequently, if the home has more frequent meetings) P.*

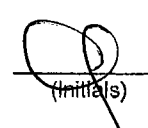
*8-17-15*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Leah Collespe</i>	<i>7/29/15</i>

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

The above plan of correction is approved as of <u>8-17-15</u> (Date)	Plan of correction implementation status as of <u>8-17-15</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

Violation Report: 20813 - 05/20/2015 - Dumas, Gerald  
 PCH Name: COMMUNITY SERVICES GROUP

**1. REGULATION 55 Pa.Code §2600**  
 2600.202 - The following procedures are prohibited:  
 (1) Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited.  
 (2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.  
 (3) Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited.  
 (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited.  
 (5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited.  
 (6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited.

**2a. DESCRIPTION OF VIOLATION**  
 The Medication Administration Records (MARS) of resident # 3 indicated that in February and March 2015, former Direct Care Staff A administered PRN Lorazepam very closely to, or often at the same time as the resident's routine Clorazepam. Staff witness statements indicated that former Staff Person A admitted to other staff that she/he administers Lorazepam to address the resident's behaviors.

**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.*

2600.202- The following procedures are prohibited:  
 (1) Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited. (2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited. (3) Pressure point techniques, defined as the application for the purpose of achieving compliance, is prohibited. (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior is prohibited. (5) A mechanical constraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited. (6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. The MARS of resident #3 indicated that in February and March 2015, former Direct Care Staff A administered PRN Lorazepam very closely to or often at the same time as the resident's routine Clorazepam. Staff witness statements indicated that former staff person A admitted to other staff that she/he administers Lorazepam to address the resident's. To prevent the incident for the future, CSG is in the process of revising the policy for administering PRN medications. CSG staff will also at time of resident's doctor appointments ask physicians for specific directions on the use of PRN that are in the same family or prescribed to address the same symptoms to avoid use at the same time. Former staff person A was terminated from employment at the conclusion of the investigation, was suspended while investigation was conducted.

*Attn or Senior Manager will submit a copy of the revised policy to the Director Northeast Regional office upon completion. 8-17-15*

Repeat Violation: No      Date(s) of Previous Violation(s):      completion. 8-17-15

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Leah Gill esp: e*

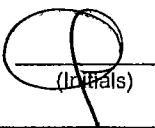
Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) \_\_\_\_\_ Date: *7/29/15*

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The above plan of correction is approved as of 8-17-15  
 (Date)

Plan of correction implementation status as of 8-17-15  
 (Date)

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

The above plan of correction was approved by   
 (Initials)