



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: April 19, 2016

Ms. Janet Stockhausen, Administrator
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 Ms. Stockhausen:

As a result of the Department of Human Services' licensing inspection on November 9, 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,

A handwritten signature in cursive script that reads "Susie Pollock".

Susie Pollock
Human Services Licensing Supervisor

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: Janet Stockhausen		Region: WEST
Legal Entity Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP LLC		RECEIVED APR 14 2016 WEST REGION FIELD OFFICE Human Services Licensing
Legal Entity Address: 240 CEDAR HILL DRIVE, MCMURRAY, PA 15317		
Certificate(s) of Occupancy I-1 11/16/2011 Peter's Township		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 138	Waking Staff: 104
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Incident		
On-Site Inspections Dates and Department Representatives On-Site		
11/09/2015: Culter, Jan		
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: 109 Number of Residents Served: 97 Secured Dementia Care Unit in Home: Yes Area: Secure Dementia Care Unit Secured Dementia Unit Capacity, if Applicable: 35 Number of Residents Served in Secured Dementia Care Unit, if applicable: 29 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: 97 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 41 Have a Physical Disability: 0	

Violation Report: 44346 - 11/09/2015 - Cutler, Jan
PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP

APR 14 2016

1. REGULATION 65 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

Resident #1 receives hospice services due to end stage Dementia and resides on the Secured Dementia Care Unit (SDCU).

On 8/27/15, at 5:30 a.m., resident #1 became uncooperative and combative towards direct care staff person A as he/she was providing morning ADLs's (Activities of Daily Living) services. Direct care staff person A yelled, "Jesus Christ, I can't deal with this" at the resident while he/she was forcefully rolling the resident onto his/her side to change their adult brief. Resident #1 usually requires the assistance of 1 direct care staff person, however, when the resident becomes resistant to care, he/she requires the assistance of 2 direct care staff persons. Although resident #1 became uncooperative with care, direct care staff person A did not call another staff person for assistance. Direct care staff person B heard the commotion and entered resident #1's room and asked direct care staff person A to leave.

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

1. Immediately following the report of the incident on 8/27/15, the employee was suspended.
2. The Director of Nursing conducted an investigation into the incident the morning of 8/27/15. Staff were interviewed and written statements were received. The resident was unable to be interviewed secondary to severe dementia. Following the investigation the employee was terminated on 8/28/15. All employees are in-serviced, upon hire on Resident Rights and Mandatory Abuse and Neglect Reporting. The employee received the in-services on 6/25/15 before she had direct contact with residents.

Training provided to staff to ensure the violation does not reoccur:

1. To ensure that the deficient practice does not reoccur, all nursing employees were in-serviced in the months of September, October and November 2015 on Abuse Reporting, Resident Rights and Dignity and Respect. In-services on Abuse Reporting, Resident Rights and Dignity and Respect are scheduled for April and October for 2016.

Within 45 days of receipt of the plan of correction, all staff persons will receive specialized dementia care training to include, identifying resident abuse, utilizing positive interventions in a respectful manner to inhibit inappropriate behaviors and resident safety provided by an Department-approved outside source. Documentation of education shall be kept. *SW 4/14/16*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Janet C. Stockhausen BN NHA</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
JANET C STOCKHAUSEN	4-8-16

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

The above plan of correction is approved as of 4-14-16
(Date)

Plan of correction implementation status as of 4-14-16
(Date)

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

The above plan of correction was approved by SWP
(Initials)