



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 19 2016

Ms. Cindy S. Cross, Assistant Secretary
Heatherwood Retirement Investors LLC
Attn: Teresa Thigpen
3570 Keith Street NW
Cleveland, Tennessee 37312

RE: Heatherwood Retirement Community
3180 Horseshoe Pike
Honeybrook, Pennsylvania 19344
License #: 104550

Dear Ms. Cross:

As a result of the Department of Human Services' annual licensing inspection on February 11, 2016 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 that reads "Jay Bausch".

Jay Bausch
Deputy Secretary

Enclosure
License Inspection Summary

Violation Report: 14055 - 02/11/2016 - Gillespie, Denise
 PCH Name: Heatherwood Retirement Community

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

The pre-admission screening form for Resident #1, admitted [redacted] 2015, does not include a determination that the home can meet the service needs of the resident.

The pre-admission screening form for Resident #2, admitted [redacted] 2015, does not include a determination that the home can meet the service needs of the resident.

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.

Responses to the cited deficiencies do not constitute an admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies. The Plan of Correction is prepared solely as a matter of compliance with Federal and State Law.

- A. **With Respect to the Specific Residents Cited:**
 2600.224(a)-A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.
 The preadmission screening tool cannot be adjusted, however the residents were cleared for admission at the time of the prescreening, although the prescreener failed to check the appropriate box on the form.
- B. **With Respect to How the Facility will Identify Residents with the Potential for the Identified Concern and Take Corrective Action:**
 All preadmission screening forms will be double checked by another Personal Care Administrator prior to being placed in the file to verify that all appropriate documentation is completed.
- C. **With Respect to What Systemic Measures have been put in place to Address the Stated Concern:**
 All prescreening admission forms will be double checked by another Personal Care Administrator prior to being placed in the file to verify that all appropriate documentation is completed.
- D. **With Respect to How the Plan of Corrective Measures will be Monitored:**
 Executive Director will review the preadmission screening, as a 3rd check, to authorize the home's ability to meet the needs of the resident prior to admission.

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

Signature of Legal Entity Representative (Required on EVERY Page) Susan W. Cacioppo

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| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Susan W. Cacioppo</u> | Date <u>4/5/16</u> |
|--|--------------------|

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

The above plan of correction is approved as of 4-6-16
 (Date)

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

Plan of correction implementation status as of 4-6-16
 (Date)

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