



pennsylvania
DEPARTMENT OF HUMAN SERVICES

NOV 23 2016

Mr. Derek S. Culbertson, Administrator
Paramount Senior Living at Peters Township, LLC
240 Cedar Hill Drive
McMurray, Pennsylvania 15317

RE: Paramount Senior Living at Peters Township
License #: 443460

Dear Mr. Culbertson:

As a result of the Department of Human Services' annual licensing inspections on August 29, 2016 and August 30, 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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License 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: Derek Culbertson		Region: WEST
Legal Entity Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP LLC		
Legal Entity Address: 240 CEDAR HILL DRIVE, MCMURRAY, PA 15317		RECEIVED
Certificate(s) of Occupancy I-1; I-2; A-2 11/16/2011 Peters Township		SEP 23 2016 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 134	Waking Staff: 101
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Complaint		
On-Site Inspections Dates and Department Representatives On-Site 08/29/2016: Sultherand, Brent; Daerr, Alicia; Georgoulis, Karen 08/30/2016: Sutherland, Brent; Georgoulis, Karen		
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: 94 Secured Dementia Care Unit In Home: Yes Area: Rooms 200-216 Secured Dementia Unit Capacity, If Applicable: 34 Number of Residents Served in Secured Dementia Care Unit, If applicable: 30 Number of Current Hospice Residents: 12 Number of Hospice Residents in past year: 39		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 93 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 40 Have a Physical Disability: 0

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Violation Report: 44346 - 08/29/2016 - Sultherland, Brent
PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION

Resident #4's glucometer was used to measure resident #3's blood glucose levels on 8/26/16 at 11:25 a.m., 4:06 p.m., and 8:08 p.m.
On 8/30/16 at 2:40 p.m., a soiled adult brief was on the floor of the hallway next to the electrical room, across from room #328.

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

2600.85(a) - Sanitary conditions will be maintained.

To correct the violation, on 8/31/16 all glucometers were replaced throughout the facility by the pharmacy at no cost to the residents. Residents #3 and # 4 as well as all other residents requiring blood glucose monitoring are equipped with their own monitor, alcohol swabs, test strips, and lancets. Insulin dependent residents are supplied with their own insulin and syringes. Sharps containers are located in each resident's room. To ensure the deficient practice does not reoccur, all nurses and med techs were in-serviced on 8/31/2016. The Diabetes Management policy was reviewed and each employee was given the copy as a reference. Glucometer monitoring will be added to the QAPI plan and monitored for compliance by the Director of Nursing biannually in October 2016 and March 2017.

2600.85(a) - Sanitary conditions will be maintained. To correct the violation, on 8/31/16, the soiled brief was properly disposed of immediately after the discovery. The carpet was disinfected following the removal of the soiled brief. To ensure the deficient practice does not reoccur, the housekeeping and nursing departments were in-serviced on proper disposal of soiled waste on 9/22/16 and 9/23/16. Proper disposal of soiled waste will be added to the QAPI plan and monitored for compliance by the housekeeping department. Daily rounds will be made throughout the facility to ensure clean and sanitary conditions.

Immediately: All resident glucometers shall be clearly labeled with the resident's name for

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Derek Culbertson*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) **DEREK CULBERTSON** Date **9/23/16**

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

The above plan of correction is approved as of 10/7/16
(Date)

Plan of correction implementation status as of 10/7/16
(Date)

The above plan of correction was approved by [Signature]
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress *[Signature]*
- Partially Implemented - Inadequate Progress
- Not Implemented

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Violation Report: 44346 - 08/29/2016 - Sutherland, Brent
PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION

There were no emergency numbers posted on or by the telephone at the 2nd floor nurse's station, to include the nearest hospital, police department and poison control center. (Observed 8/29/16)

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.

2600.91 - Telephone numbers for the nearest hospital, police department, ambulance, poison control, local emergency management, and personal care home complaint hotline shall be posted on or by each telephone with an outside line. To correct the violation, a sticker with the appropriate phone numbers was placed on the phone in the nurses station immediately after the discovery on 8/29/2016. To ensure the deficient practice does not reoccur, the nursing, maintenance, and housekeeping departments were in-serviced on the regulation (2600.91) on 9/22/2016 and 9/23/2016. Telephone stickers will be added to the QAPI plan. All telephones with outside lines will be monitored monthly for compliance by the maintenance department.

Repeat Violation: No

Date(s) of Previous Violation(s):

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Derek Culbertson

Printed Name and Title of Legal Entity Representative
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DEREK CULBERTSON

Date 9/25/16

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WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 44346 - 08/29/2016 - Sutherland, Brent
PCH Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP

1. REGULATION 55 Pa.Code §2600

2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION

Resident #2's bedside lamp was inoperable. (Observed 8/30/16)

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.

2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at the bedside.

To correct the violation, resident #2's lamp was made operable by plugging the lamp into the outlet (it was discovered that the light bulb was not burned out, but that the plug had been bumped just enough to disconnect power to the lamp). This was completed on 8/31/16. To ensure the deficient practice does not reoccur for this resident and all other residents, the housekeeping and nursing departments were in-serviced on the regulation on 9/22/2016 and 9/23/2016. Bedside lights will be added to the QAPI plan and monitored monthly for compliance by the housekeeping department.

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WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #1 was prescribed, "Ibuprofen-400mg-Take 1 tablet by mouth every 6 hours as needed for pain", as well as, Acetaminophen-325mg-Take 2 tablets every 4 hours as needed for pain". At approximately 11:30 p.m. on 5/4/16, then again at 12:15 a.m. on 5/5/16, resident #1 complained of pain and requested medication. The home failed to administer pain medication to resident #1 until 12:23 a.m. on 5/5/16. At approximately 5:30 a.m. on 5/7/16, then again at 6:45 a.m., resident #1 complained of pain and requested medication. The home failed to administer medication to resident #1 until 7:02 a.m. on 5/7/16. At approximately 1:30 a.m. on 5/8/16, then again at 2:30 a.m., resident #1 complained of pain and requested medication. The home failed to administer medication to resident #1 until 2:58 a.m. on 5/8/16.

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.

2600.187(d) - The home shall follow the directions of the prescriber.

To correct the violation for resident #1 and all residents, PRN medications will follow prescriber's directions and be given in a timely manner. To ensure the deficient practice does not reoccur, the nursing staff was in-serviced 9/23/16 and 9/24/16 on the PRN medication policy with emphasis on timeliness. PRN medications will be added to the QAPI plan and monitored quarterly for compliance by the Director of Nursing.

Immediately: The administrator or designated staff person shall interview at least 5 residents monthly to ensure residents are receiving their medications, to include PRN medications, in a timely manner.

[Signature]

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

[Signature: Derek Culbertson]

Printed Name and Title of Legal Entity Representative
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