



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 21 2017

Mr. Rocco Palladini, Executive Director
Paramount Senior Living at Bethel Park, LLC.
5785 Baptist Road
Bethel Park, Pennsylvania 15102

RE: Paramount Senior Living at Bethel Park
License #: 440880

Dear Mr. Palladini:

As a result of the Department of Human Services' annual licensing inspections on September 6, 2016 and September 7, 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

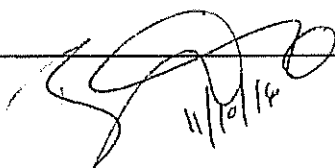
A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK		License Number: 44088
Address: 5785 BAPTIST ROAD, BETHEL PARK, PA 15102		County: Allegheny
Administrator: Rocco Palladini		Region: WEST
Legal Entity Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK LLC		
Legal Entity Address: 5785 BAPTIST ROAD, BETHEL PARK, PA 15102		
Certificate(s) of Occupancy I-1 10/29/2009 Municipality of Bethel Park		RECEIVED NOV 16 2016 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 152	Waking Staff: 114
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Complaint, Incident		
On-Site Inspections Dates and Department Representatives On-Site 09/06/2016: Bedford, Katie; Hultquist, Cliff 09/07/2016: Bedford, Katie; Hultquist, Cliff		
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: 125 Number of Residents Served: 104 Secured Dementia Care Unit in Home: Yes Area: 3rd Floor Secured Dementia Unit Capacity, if Applicable: 28 Number of Residents Served in Secured Dementia Care Unit, if applicable: 20 Number of Current Hospice Residents: 10 Number of Hospice Residents in past year: 43	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 104 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 48 Have a Physical Disability: 2	


 11/10/14

Violation Report: 44088 - 09/08/2016 - Bedford, Katie
 PCH Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK

NOV 10 2016
 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 #1's glucometer was used to test resident #2's blood glucose levels on multiple dates and times, including the following:

- *9/1/16 at 4:42 pm
- *9/3/16 at 11:03 am
- *9/5/16 at 8:26 pm
- *9/6/16 at 4:17 pm


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.

Regulation 2600.85(a) regarding glucometer use.

1. Resident #1 and Resident #2 both had their glucometers replaced at no cost on 9/8/16.
2. On 9/8/16 all personal care residents currently ordered blood glucose monitoring were confirmed to have their own glucometer.
3. On 9/8/16 all direct care staff responsible for performing blood glucose monitoring were educated on how glucometers are stored in the medication cart, each resident needs their own glucometer, and sharing a glucometer is not allowed.
4. All direct care staff were educated in September on storing glucometers in the medication cart, each resident needs their own glucometer, and sharing a glucometer is not allowed. Documentation was kept.
5. All direct care staff will be educated monthly from November to April on storing glucometers in the medication cart, each resident needs their own glucometer, and sharing a glucometer is not allowed. Documentation will be kept.
6. The Director of Nursing will perform a monthly cart audit from November to April. The audit will consist of comparing glucometer readings for at least two residents to confirm compliance is continued. Documentation will be kept.

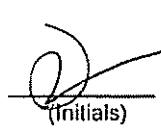
Repeat Violation: No	Date(s) of Previous Violation(s):		
----------------------	-----------------------------------	--	--

Signature of Legal Entity Representative
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative (Required on EVERY Page) TRACY PALUMBO EXECUTIVE DIRECTOR	Date 11/11/16
--	---------------

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

The above plan of correction is approved as of <u>12/1/16</u> (Date)	Plan of correction implementation status as of <u>12/1/16</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