



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: JUN 29 2017**

Ms. Francie K. Hoch, Executive Director  
Greenfield of Perkiomen Valley, LLC  
6312 Seven Corners Center 161  
Falls Church, Virginia 22044

RE: Greenfield of Perkiomen Valley  
300 Perkiomen Avenue  
Schwenksville, Pennsylvania 19473  
License #: 137350

Dear Ms. Hoch:

As a result of the Department of Human Services' licensing inspection on 03/07/17, on which we conducted on-site inspections] 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,



Roslyn Brewer  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

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

PCH Name: GREENFIELD OF PERKIOMEN VALLEY		License Number: 13735
Address: 300 PERKIOMEN AVENUE, SCHWENKSVILLE, PA 19473		County: Montgomery
Administrator: Francie Hoch		Region: SOUTHEAST
Legal Entity Name: GREENFIELD OF PERKIOMEN VALLEY LLC		
Legal Entity Address: 6312 SEVEN CORNERS CENTER 161, FALLS CHURCH, VA 22044		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 125	Waking Staff: 94
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 03/07/2017: Kazimer, Lauren		
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: 120	Number of Residents who:	
Number of Residents Served: 83	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit In Home: Yes	Are 60 Years of Age or Older: 81	
Area: Willow	Have Mental Illness: 3	
Secured Dementia Unit Capacity, if Applicable: 44	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 33	Have a Mobility Need: 42	
Number of Current Hospice Residents: 7	Have a Physical Disability: 3	
Number of Hospice Residents in past year: 15		

Violation Report: 13735 - 03/07/2017 - Kazimer, Lauren  
 PCH Name: GREENFIELD OF PERKIOMEN VALLEY

**1. REGULATION 55 Pa.Code §2600**  
 2600.15(b) - If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

**2a. DESCRIPTION OF VIOLATION**  
 On 3.4.2017, an allegation of abuse was made against staff person A regarding resident #1. The home did not develop and implement a plan of supervision in conjunction with the Department.

**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.

*Please see attached.*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Francie K. Hoch*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Francie K. Hoch</i>	Date <i>4-18-17</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of *4/26/17*  
 (Date)

Plan of correction implementation status as of *4/26/17*  
 (Date)

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

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

Greenfield of Perkiomen Valley  
Violation Report: 13735 – 3/7/17  
3. PLAN OF CORRECTION (POC)

At the time that the abuse allegation was made, the employee in question was placed on a plan of supervision, working only with another employee and not with the resident in question, until an internal investigation could be completed. Multiple staff were interviewed and provided statements, the staff in question was interviewed and provided a statement and the family was contacted and made aware of the allegation. After discussion amongst the Memory Care Coordinator, Activities Director and Executive Director we felt comfortable that no abuse had occurred and allowed the employee to return to unsupervised work. [REDACTED] was however, moved to Personal Care instead of Memory Care as the resident in question had made racial slurs against the staff and was continuing to demonstrate this behavior. The staff member did not return to providing care in our memory care unit until after the passing of the resident who was making the racial slurs.

Upon visit from the Department of Human Services on April 7, 2017 the allegations were determined to be unfounded. We were informed that we would be cited as we did not comply with the regulation to have the staff person either suspended from work immediately or obtain approval for a plan of correction from DHS until DHS could complete their investigation.

On April 8, 2017 at our management meeting the regulations regarding abuse reporting and the need for suspension or an approved plan of supervision was reviewed and discussed with all members of the management team. All managers were instructed that for any or all future allegations of abuse the Executive Director is to be contacted immediately and the staff person in question will be suspended immediately pending investigation by DHS.

The Executive Director conducts an annual training for all staff in June on Elder Abuse and will include in the training the policy of suspending any staff accused of abuse until complete investigation by DHS is conducted.

*Francis Hoch, Executive Director*  
4/18/17