



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]
MAILING DATE: November 8, 2017

Ms. Susan Sartoretto
Owner
Morgan Hill Senior Living LLC
215 Cedar Park Boulevard
Easton, Pennsylvania 18042

RE: Abington Manor at Morgan Hill – Memory Care Village
5 Cedar Park Boulevard
Easton, Pennsylvania 18042
License: 226140

Dear Ms. Sartoretto:

As a result of the Department of Human Services' licensing inspection on April 21, 2017 and July 12, 2017 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,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 22614 - 04/21/2017 - Novak, Ryan
PCH Name: ABINGTON MANOR AT MORGAN HILL MEMORY CARE VILLAGE

1. REGULATION 55 Pa.Code §2600
2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION
On 5/18/17 Resident #1 was found touching Resident #2's breast. The home did not submit an incident report to the Department until 6/2/17.

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 sheet 2 of 3
[Signature]

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Mary Ann Smolenskyak* Date *10/3/17*

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

The above plan of correction is approved as of <u>11-2-17</u> (Date)	Plan of correction implementation status as of <u>11-2-17</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (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

Violation Report #22614- 10/3/17

pg 2 of 3

Abington Manor at Morgan Hill-Memory Care Village

1. Regulation: 2600.16 (c) – The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

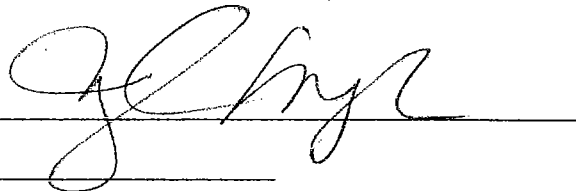
2. Plan of Correction: 2 of 3

It is always our intent to ensure that the facility is following the regulations correctly. In this the home inadvertently missed filing an incident report within 24 hours to the DHS.

- Upon further review it was found that the Director of Resident Care (DRC) followed the abuse reporting guidelines and made an oral report to AAA within 1 ½ hours after the incident occurred, and followed up by faxing the written Act 13 Mandatory report the same day. The DRC completed the required DHS incident report within 3 ½ hours after the incident occurred and documented that she faxed it at 6:30pm the same day, unfortunately the facility received a call from DHS 6/2/17 stating the report was never received.
- The DRC may have inadvertently forgot to fax the report in error.
- The facility has a process in place to report all reportable incidents within 24 hours, and retrained all staff members at a face to face training session by the Administrator 9/14/17. (see attached sign in sheet)
- It will continue to be the responsibility of the DRC, with the Administrators oversight to ensure that all reportable incidents are followed up and reported to DHS within the mandatory 24 hour timeframe.

Name and Title of Legal Entity Representative: Mary Ann Smokenyak, Administrator

Signature of Legal Entity: _____



Date: _____

10/3/17

OK
ASG
11-2-17

Violation Report: 22614 - 04/21/2017 - Novak, Ryan
 PCH Name: ABINGTON MANOR AT MORGAN HILL MEMORY CARE VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION
 On 3/25/17 Resident #3 was observed touching Resident #2 in the genital area, the residents were separated and no injuries were noted. On 6/9/17 Resident #3 was observed on top of Resident #2 in the bedroom on the bed, both residents pants were down to their ankles. The bedroom door was blocked by Resident #3's chair and walker. Resident #3 reported to licensing representatives that things did not go as far as they could have with Resident #2. Resident #3 initially reported that the resident "wants a woman!" Staff interviews indicated that Resident #3 will seek Resident #2 out. Resident #2 did not have any recollection of the above noted events.

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 sheet 3073

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Mary Ann Smolenski* Date *10/3/17*

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

The above plan of correction is approved as of <u>11-4-17</u> (Date)	Plan of correction implementation status as of <u>11-4-17</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (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

Violation Report #22614- 10/3/17

PSA 3

Abington Manor at Morgan Hill-Memory Care Village

1. Regulation: 2600.42 (b) – A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2. Plan of Correction: 3 of 3

It is always our intent to ensure that the facility is following the regulations correctly.

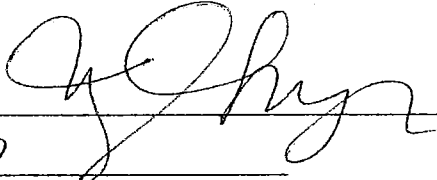
- In this incident, resident #2 & #3 were immediately put on 15 minute checks after the first incident and continued thereafter. Unfortunately, both residents seek out each other's companionship.


* In similar circumstances, a one-to-one supervision of the resident may be warranted. Contact the Regional office to discuss.

- The facility reported both incidents to DHS within 24 hour timeframe, as well as AAA. Upon AAA visit to the facility and follow up it was decided that resident #3 was not appropriate for this facility and the family relocated resident #3 to another Dementia facility 8/4/17.

- It will continue to be the responsibility of the DRC, with the Administrators oversight to ensure that all resident are secure and safe.

Name and Title of Legal Entity Representative: Mary Ann Smokenyak, Administrator

Signature of Legal Entity: 
 Date: 10/3/17

to discuss.

 11-2-17

OK
 AS
 11-2-17