



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: JUL 24 2017

Mr. Sean Roberts, Authorized Signatory
North Wales 1089 BG OPCO LLC
330 North Wabash Avenue, Suite 3700
Chicago, Illinois 60611

RE: Park Creek Place Memory Care
1089 Horsham Road
North Wales, Pennsylvania 19454
License #: 142560

Dear Mr. Roberts:

As a result of the Department of Human Services' licensing inspections on April 24, 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,



Patricia Adams
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 14258 - 04/24/2017 - Thomas, Tahesia
 PCH Name: PARK CREEK PLACE MEMORY CARE

1. REGULATION 65 Pa.Code §2600

2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
- (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Staff Member A, hired on [REDACTED] 16, did not complete training topics 1-4.

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.

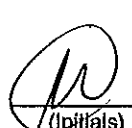
- Employee [REDACTED] is not longer employed at Park Creek Place.
- Park Creek Place MC has completed employee file audits, and provided remediated training for any staff member identified with deficient initial training.
- Park Creek Place MC has implemented a new orientation process where newly hired staff receive training that is documented on days 1-5, for the above topics. Documentation of new hire training occurs using the attached training verification form.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Julia Monroe, Executive Director</i>	Date <i>7/10/17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>7/11/17</u> (Date)	Plan of correction implementation status as of <u>7/11/17</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