



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: January 31, 2018

Mr. Bryan Botts
Administrator
Jeffco Health Services, Inc.
417 Route 28
Brookville, Pennsylvania 15825

RE: Jefferson Court
Certificate #: 406240

Dear Mr. Botts:

As a result of the Department of Human Services' licensing inspection on June, 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,

A handwritten signature in black ink, appearing to read "Jon Kimberland".

Jon Kimberland
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: JEFFERSON COURT		License Number: 40624
Address: 417 RT 28, BROOKVILLE, PA 15825		County: Jefferson
Administrator: Erick Foulkrid		Region: WEST
Legal Entity Name: JEFFCO HEALTH SERVICES INC		
Legal Entity Address: 417 RT. 28, BROOKVILLE, PA 15825		
Certificate(s) of Occupancy C-2 LP 02/09/1999 Land I		<p>RECEIVED</p> <p>JAN 16 2018</p> <p>WEST VIRGINIA REG. OFFICE Marion, Seniors Licensing</p>
Staffing Hours		
Resident Support: 0	Total Daily Staff: 63	Waking Staff: 47
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 06/01/2017: Grace, Desmond; Barry, Courtney		
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: 48 Number of Residents Served: 42 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 2 Number of Hospice Residents in past year: 4	Number of Residents who: Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 40 Have Mental Illness: 2 Have an Intellectual Disability: 1 Have a Mobility Need: 21 Have a Physical Disability: 1	

Violation Report: 40624 - 06/01/2017 - Grace, Desmond

PCH Name: JEFFERSON COURT

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 5/19/17 at approximately 12:00 p.m., in the hallway near room #114, direct care staff member A began yelling at resident #2 for the resident to go back to the resident's room for a medical procedure. Resident #2 sat on a bench in hallway near his/her room. Direct care staff person A then stated "I know you can hear me stupid". Direct care staff person B was present during the incident. However, the home did not report the allegation to the area agency on aging until 5/23/17.

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.

Staff were In-serviced on 06/08/2017 on the correct procedures for abuse reporting and the consequences of not reporting in a timely manner. To prevent the violation from occurring again, staff will be In-serviced on abuse prevention and timely reporting upon hire and annually. Employees who fail to report abuse timely will receive disciplinary action. The Administrator or designee will report all incidents of abuse immediately to the area agency on aging.

Immediately: The administrator shall review all reported incidents and any allegations of abuse at least weekly to ensure any allegations of abuse and reportable incidents are reported in accordance with the Older Adult Protective Services Act. 1-17-18 ✓

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page)

[Handwritten Signature]

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)

BRYAN BOTTIS ADMINISTRATOR

Date 1-12-18

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

The above plan of correction is approved as of 1-17-18 (Date)

Plan of correction implementation status as of 1-17-18 (Date)

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

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

JAN 16 2018

Violation Report: 40624 - 06/01/2017 - Grace, Desmond

PCH Name: JEFFERSON COURT

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 5/19/17 at approximately 12:00 p.m., in the hallway near room #114, direct care staff member A began yelling at resident #2 for the resident to go back to the resident's room for a medical procedure. Resident #2 sat on a bench in hallway near his/her room. Direct care staff person A then stated "I know you can hear me stupid". Direct care staff person B was present during the incident. Direct care staff person B was not placed on suspension or placed on a plan of supervision and continued to provide direct care services to residents of the home including resident #2 as follows:

- * On 5/19/17 until 2:00 p.m.
- * On 5/20/17 from 6:00 a.m. to 2:00 p.m.

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

Direct Care Staff Person A was terminated from employment on 5/23/17. The Administrator will be responsible for ensuring that staff who are accused of abuse will be immediately suspended or placed on a plan of supervision as submitted and approved by the Department. If the allegation is substantiated, the employee will be terminated. Staff were in-serviced on 06/08/2017 on the correct procedures for abuse reporting and the consequences of not reporting in a timely manner. To prevent the violation from occurring again, the Administrator will ensure that staff are in-serviced on abuse prevention and timely reporting upon hire and annually. Employees who fail to report abuse timely will receive disciplinary action.

Immediately: If any suspected abuse or allegations of abuse occur, the home shall immediately place the accused staff person on a plan of supervision which includes not having access to any residents without the presence of another qualified direct care staff person, which must have the pre-approval of the Department, or suspend the staff person or persons involved. 1-12-18 ✓

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

[Handwritten Signature]

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

BRYAN BOTTS ADMINISTRATOR

Date 1-12-18

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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: 40624 - 06/01/2017 - Grace, Desmond
PCH Name: JEFFERSON COURT

PROTECTIVE SERVICES
PHILADELPHIA COUNTY

1. REGULATION 55 Pa.Code §2600
2600.15(d) - The home shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.

2a. DESCRIPTION OF VIOLATION
On 5/19/17 at approximately 12:00 p.m., in the hallway near room #114, direct care staff member A began yelling at resident #2 for the resident to go back to the resident's room for a medical procedure. Resident #2 sat on a bench in hallway near his/her room. Direct care staff person A then stated "I know you can hear me stupid". Direct care staff person B was present during the incident. The home did not notify resident's designated person of the incident's occurrence.

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.

The Administrator or designee will be responsible for ensuring that residents' designated persons are notified of any incidents. Staff were in-serviced on 06/08/2017 on the correct procedures for abuse reporting and the consequences of not reporting in a timely manner. To prevent the violation from occurring again, the Administrator will ensure that staff are in-serviced on abuse prevention and timely reporting upon hire and annually. Employees who fail to report abuse timely will receive disciplinary action.

Immediately: The administrator shall review all reported incidents and any allegations of abuse at least weekly to ensure any allegations of abuse are reported the resident's designated person. 1-17-18

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

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

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) BRYAN BOTTS ADMINISTRATOR Date 1-12-18

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The above plan of correction is approved as of 1-17-18
(Date)

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

Plan of correction implementation status as of 1-17-18
(Date)

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Violation Report: 40624 - 06/01/2017 - Grace, Desmond
PCH Name: JEFFERSON COURT

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 5/19/17 at approximately 12:00 p.m., in the hallway near room #114, direct care staff member A began yelling at resident #2 for the resident to go back to the resident's room for a medical procedure. Resident #2 sat on a bench in hallway near his/her room. Direct care staff person A then stated "I know you can hear me stupid". Direct care staff person B was present during the incident. However, the allegation was not reported to the Department until 5/22/17.

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

Staff were in-serviced on 06/08/2017 on the correct procedures for abuse reporting and the consequences of not reporting in a timely manner. To prevent the violation from occurring again, the Administrator will ensure that staff are in-serviced on abuse prevention and timely reporting upon hire and annually. Employees who fail to report abuse timely will receive disciplinary action. The Administrator or designee will be responsible for ensuring that all incidents of abuse are reported to the Department's personal care home regional office or personal care home complaint hotline within 24 hours.

Immediately: The administrator or designee shall review all reportable incidents and conditions at least weekly to ensure all reportable incidents and conditions are reported to the Department in accordance with regulation 2600.16c.

1-17-18

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

Signature of Legal Entity Representative
(Required on EVERY Page)  LPN

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) **BRYAN BOTTIS ADMINISTRATOR** Date **1-12-18**

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(Date)

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(Date)

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The above plan of correction was approved by Y
(Initials)

RECEIVED

JAN 16 2018

PROBATION DEPARTMENT OFFICE
215 N. 3rd Street, Lansing

Violation Report: 40624 - 06/01/2017 - Grace, Desmond
PCH Name: JEFFERSON COURT

1. REGULATION 55 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION

On 5/19/17 and 5/20/17, at approximately 8:30 a.m. at the breakfast table, direct care staff person A discussed continence care issues with resident #1 in the presence of other residents. Direct care staff person A then directed resident #1 to go to the bathroom. The resident felt humiliated from this discussion.

On 5/19/17 at approximately 12:00 p.m., in the hallway near room #114, direct care staff member A began yelling at resident #2 for the resident to go back to the resident's room for a medical procedure. Resident #2 sat on a bench in hallway near his/her room. Direct care staff person A then stated "I know you can hear me stupid".

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.

Direct Care Staff Person A was terminated from employment on 5/23/17. Staff were provided an in-service on 06/10/2017 on resident rights including treating residents with dignity and respect. To prevent the violation from occurring again, the Administrator will ensure that staff are in-serviced on resident rights upon hire and annually. Employees who fail to treat residents with dignity and respect will be terminated from employment.

Immediately: The administrator will privately interview at least two residents a week for three months and biannually thereafter to ensure residents are treated with dignity and respect. Documentation of interviews shall be kept.

1-17-18y

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

[Handwritten Signature]

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

BRYAN BOTTS ADMINISTRATOR

Date 1-12-18

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