pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 2 8 2018

Mr. Gilbert J. Brown,
CEO
Hospice of Central Pennsylvania, Inc.
1320 Linglestown Road
Harrisburg, Pennsylvania 17110

RE: The Carolyn Croxton Slane Residence -
Hospice of Central PA
1701 Linglestown Road
Harrisburg, Pennsylvania 17110
Certificate #: 362220

Dear Mr. Brown:

As a result of the Department of Human Services' annual licensing inspection on December 13, 2017, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

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,

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: THE CAROLYN CROXTON SLANE RESIDENCE HOSPICE OF CENTRAL PA	License Number: 36222
Address: 1701 LINGLESTOWN ROAD, HARRISBURG, PA 17110	County: Dauphin
Administrator: Diana O'Neil	Region: CENTRAL
Legal Entity Name: HOSPICE OF CENTRAL PENNSYLVANIA INC	
Legal Entity Address: 1320 LINGLESTOWN ROAD, HARRISBURG, PA 17110	

Certificate(s) of Occupancy

C-3 SP
04/03/2001
Labor and Industry

Staffing Hours

Resident Support: 0 | Total Daily Staff: 12 | Waking Staff: 9

Type of Inspection: Full | BHA Docket Number: | Notice: Unannounced

Reason(s) for Inspection(s)

Renewal

On-Site Inspections Dates and Department Representatives On-Site

12/18/2017: Cargile, Kallie

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: 6

Number of Residents Served: 6

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: 6

Number of Hospice Residents in past year: 217

Number of Residents who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 6

Have Mental Illness: 0

Have an Intellectual Disability: 0

Have a Mobility Need: 6

Have a Physical Disability: 0

Colbert T. Brown, CEO

Kallie I. Cargile

Violation Report: 36222 - 12/18/2017 - Cargile, Kellie
PCH Name: THE CAROLYN CROXTON SLANE RESIDENCE HOSPICE OF CENTRAL PA

1. REGULATION 55 Pa.Code §2600
2600.42(s) - A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

2a. DESCRIPTION OF VIOLATION
On 12/18/17 from 9:00 am to 11:30 am, an audio monitor was operating on a shelf in the dining area. The remote microphone was located in Resident #1's bedroom. While on, Resident #1 could be heard breathing, talking, and communicating with staff. Sounds from adjacent rooms and the hallway could also be heard. During this time, visitors were also present in the home.

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 monitors had been in use at Carolyn's House solely for the purpose of safety when we had a resident who was exhibiting signs of terminal restlessness near end of life. On the date of the inspection, all of the monitors were removed from the residence. The manager has modified the facility's restraint policy to reflect that audio and video monitoring is not permitted at any time. The policy addresses precautions that should be used when we have a resident who enters a terminal restless phase. Staff had been made aware at the December 2017 staff meeting of the change in policy and the rationale. During staff meetings scheduled on January 17 and 18, 2018 the manager will have an in-service on the policy and emphasize the other tools and strategies that we currently use for safety. The amended policy is attached.

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

Signature of Legal Entity Representative (Required on EVERY Page) Gilbert J Brown

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Gilbert J Brown — Date 1-15-18

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

The above plan of correction is approved as of 1-26-18 (Date)

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

Plan of correction implementation status as of 1-26-18 (Date)

- [x] Fully Implemented
- [ ] Partially Implemented - Adequate Progress
- [ ] Partially Implemented - Inadequate Progress
- [ ] Not Implemented