



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to PARAMOUNT SENIOR LIVING AT MAYTOWN LLC  
LEGAL ENTITY

To operate PARAMOUNT SENIOR LIVING AT LANCASTER COUNTY  
NAME OF FACILITY OR AGENCY

Located at 2760 MAYTOWN ROAD, MAYTOWN, PA 17550  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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To provide Personal Care Homes  
TYPE OF SERVICE TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 116  
MAXIMUM CAPACITY  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.  
**Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 44**

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from May 1, 2018 until November 1, 2018,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333901**

Robert E. Robinson  
ISSUING OFFICER

Carolyn K. Ellison  
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



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DEPARTMENT OF HUMAN SERVICES

APR 30 2018

Mr. James J. Cox,  
Chief Executive Officer  
Paramount Senior Living at Maytown, LLC  
3025 Washington Road, Suite 201,  
McMurray, Pennsylvania 15317

RE: Paramount Senior Living at Lancaster County  
2760 Maytown Road  
Maytown, Pennsylvania 17550  
Certificate #: 333901

Dear Mr. Cox:

As a result of the Department of Human Services' Bureau of Human Services Licensing inspection on March 12, 2018, March 13, 2018 and April 26, 2018 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the 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.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa. Code Ch. 2600.


In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services provider application submission experience. To participate in the online applicant survey, launch your web browser and go to <https://www.surveymonkey.com/r/BHSL> Application.

Bureau of Human Services Licensing

Mr. James J. Cox

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 applicant responses. Thank you in advance for providing feedback.

Sincerely,



Jacqueline L. Rowe  
Director

Enclosures  
License  
License Inspection Summary

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

PCH Name: PARAMOUNT SENIOR LIVING AT LANCASTER COUNTY		License Number: 33390
Address: 2760 MAYTOWN ROAD, MAYTOWN, PA 17550		County: Lancaster
Administrator: Lori Prevost		Region: CENTRAL
Legal Entity Name: PARAMOUNT SENIOR LIVING AT MAYTOWN, LLC		
Legal Entity Address: 3025 WASHINGTON ROAD, MCMURRAY, PA 15317		
<b>Certificate(s) of Occupancy</b>		
C-2 LP 11/17/1999 L&I	I-1 07/28/2016 East Donegal Township	
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 94	Waking Staff: 71
Type of Inspection: Initial	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b>		
New		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
03/12/2018: Springs, Israel; Gillespie, Denise		
03/13/2018: Springs, Israel; Gillespie, Denise		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 116 Number of Residents Served: 69 Secured Dementia Care Unit in Home: Yes Area: Memory Care Secured Dementia Unit Capacity, if Applicable: 44 Number of Residents Served in Secured Dementia Care Unit, if applicable: 25 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 12	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 69 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 25 Have a Physical Disability: 1	

Violation Report: 33390 - 03/12/2018 - Springs, Israel  
 PCH Name: PARAMOUNT SENIOR LIVING AT LANCASTER COUNTY

**1. REGULATION 55 Pa.Code §2600**

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**2a. DESCRIPTION OF VIOLATION**

The home has not implemented policies for the safe use and distribution of medications and medical equipment.

On the following dates and times the Medical Administration Record (MAR) for Resident #1 incorrectly documented the blood sugar measurements that were taken and stored in the resident's glucometer.

3/5/18 - 2000 - MAR: 209                      Glucometer: 208

3/9/18 - 2000 - MAR: 259                      Glucometer: 223

3/9/18 - 1600 - MAR: 238                      Glucometer: 179

On the following dates and times the Medical Administration Record (MAR) for Resident #2 incorrectly documented the blood sugar measurements that were taken and stored in the resident's glucometer.

3/2/18 - 2000 - MAR: 103                      Glucometer: 107

3/5/18 - 2000 - MAR: 124                      Glucometer: 126

3/8/18 - 1200 - MAR: 159                      Glucometer: 192

On 3/10/18, a staff member of the home mistakenly gave Resident #2 the glucometer and insulin pen belonging to Resident #1 when Resident #2 went out of the facility with family. Resident #2 used Resident #1's glucometer and insulin pen during the time of this violation.

**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 documentation  
 Page 2A*

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Lori A. Prevost*

Printed Name and Title of Legal Entity Representative                      Date  
 (Required on EVERY Page) *Lori A. Prevost, Executive Director*                      *4/13/18*

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

The above plan of correction is approved as of 4/16/18  
 (Date)

Plan of correction implementation status as of 4/27/18  
 (Date)

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

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

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There are three different issues addressed in this specific deficiency. All of the issues refer to the safe storage, access, security, distribution, and use of medications and medical equipment by trained staff persons. Attached is the policy that Paramount Senior Living at Lancaster County follows in regards to this. (Attachment #1)

The first issue has to do with the MARs not showing the correct glucometer readings/measurements that were stored in the resident's glucometers. Some of these readings had to do with trained staff doing more accu checks on the residents than was ordered. If the staff person suspected or if a resident was concerned about their blood sugar, the trained staff person would take an extra reading and have nowhere to document the reading on the MAR. This was corrected by getting a PRN order for residents with glucometers. (Attachment #2)

The Director of Wellness (DOW)/ Assistant DOW will monitor the readings on the glucometers as part of our Quality Assurance audits for a period of 90 days. They will spot check the glucometers to make sure that the measurements on the glucometers are matching the numbers on the EMAR. If there are issues with them not matching, they will reeducate the trained staff as often as necessary to insure that the issue was corrected.

The DOW and ADOW also did an inservice on the importance of putting the readings of the glucometer measurements correctly in the MAR. This inservice was completed on 3/14/18. (Attachment #3) Executive Director will insure that this issue is corrected going forward as described above.

The second issue is the trained staff person mistakenly giving a resident that went on leave of absence with family another resident's glucometer and insulin pen. This particular staff person was inserviced on 3/12/18. (Attachment #4) The entire staff was also inserviced on the same issue on 3/14/18. (Attachment #3)

A new glucometer and insulin pen were obtained for both residents. The old ones were disposed of. The physician and the family was notified.

The Director of Wellness purchased containers that fit in the medication cart that will hold each individual resident's glucometer, extra test strips, and insulin pen. This container will be marked with the resident's name and room number. This will minimize the possibility that the incorrect medical equipment will be given to a resident by a trained staff person. The DOW/ADOW will monitor for continued adherence to this policy by periodic cart audits.

Paula Prewitt, Executive Director 4/13/18