



**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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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 116  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

**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 August 15, 2018 until August 15, 2019,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333900**

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

AUG 15 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 #: 333900

Dear Mr. Cox:

As a result of the Department's Bureau of Human Services Licensing inspection on June 11, 2018, 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.


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](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.

Dear Mr. Cox

The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe', written in a cursive style.

Jacqueline L. Rowe  
Director

Enclosures

License

License Inspection Summary



Violation Report: 33390 - 06/11/2018 - Comstock, Kellie  
 PCH Name: PARAMOUNT SENIOR LIVING AT LANCASTER COUNTY

1. REGULATION 55 Pa.Code §2600  
 2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

The home has multiple gas-burning appliances which include Packaged Terminal Air Conditioner (PTAC) units in all 68 bedrooms, 5 hot water heaters, dryers and a fireplace. There are only three carbon monoxide detectors in the building. The detectors are on either side of the fireplace and over the door to the main laundry room. All detectors have installation dates of 3/28/17 and the batteries have not since been replaced.

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.

Immediately the batteries in the above mentioned detectors were changed, replaced, and labeled with the date.

The maintenance team will install carbon monoxide detectors (Attachment A). These detectors will be installed not less than 15 feet from all fossil fuel burning devices. The detectors will be interconnected so if any one detector goes off, they will all alarm, so the alarm will be able to be heard by the staff.

All of the installed detectors will be tested and cleaned as per the manufacturer guidelines. The batteries will be changed annually in all of the detectors and the batteries will be labeled and dated with installation date.

These will be delivered to the community by August 8, 2018 and will be installed no later than August 17, 2018. The Maintenance Director will keep logs in evidence of checking and cleaning the detectors and battery installation. The Executive Director will ensure ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Lori A. Prevost*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Lori A. Prevost, Executive Director* Date *8/2/18*

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

The above plan of correction is approved as of 8/7/18  
 (Date)

Plan of correction implementation status as of 8/7/18  
 (Date)

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

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

Violation Report: 33390 - 06/11/2018 - Comstock, Kellie  
 PCH Name: PARAMOUNT SENIOR LIVING AT LANCASTER COUNTY

1. REGULATION 55 Pa.Code §2600

2600.231(b) - A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

2a. DESCRIPTION OF VIOLATION

Resident #1, admitted to the Secure Dementia Care Unit on 4/19/18, had a medical evaluation that did not document the resident's need for SDCU care.

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.

Resident #1's medical evaluation was corrected immediately on 6/12/18 by attending physician, [REDACTED]. In Section #4, it is noted that resident #1 needs a secured dementia care unit (Attachment B).

An audit was done on all of the SDCU resident's DMEs and the box for SDCU was checked for all residents in the unit under section #4 under special needs.

Going forward, Director of Wellness will insure that the correct box for SDCU under section #4 on the DME is marked for all of the residents that reside on the memory care unit. She will ensure this for all new residents into the unit and all annual medical evaluations.

The Executive Director will conduct ongoing chart audits to insure that we remain in compliance with this regulation.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Lori A. Provost*

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

*Lori A. Provost, Executive Director*

Date *8/2/18*

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