



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailing Date: August 3, 2018

Mr. Brian K. Wood,
Vice President and Treasurer
EC OPCO Shippensburg LLC
500 North Hurstbourne Parkway, Suite 200
Louisville, Kentucky 40222

RE: Elmcroft of Shippensburg
129 Walnut Bottom Road
Shippensburg, Pennsylvania 17257
Certificate #: 333750

Dear Mr. Wood:

As a result of the Department's Bureau of Human Services Licensing inspection on July 25, 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.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: ELMCROFT OF SHIPPENSBURG		License Number: 33375
Address: 129 WALNUT BOTTOM ROAD, SHIPPENSBURG, PA 17257		County: Cumberland
Administrator: Jennifer Kipe		Region: CENTRAL
Legal Entity Name: EC OPCO SHIPPENSBURG LLC		
Legal Entity Address: 500 N HURSTBOURNE PKWY STE 200, LOUISVILLE, KY 40222		
Certificate(s) of Occupancy I-2 07/22/2011 Middle Dept Insp. Agency		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 40	Waking Staff: 30
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 07/25/2018: Showers, Michael		
Off-Site Inspection Dates and Inspectors, if Applicable 07/25/2018: Showers, Michael		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 62 Number of Residents Served: 38 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: 6	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 38 Have Mental Illness: 1 Have an Intellectual Disability: 1 Have a Mobility Need: 2 Have a Physical Disability: 1	

Violation Report:
 PCH Name: Elmcroft of Shippensburg

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

2a. DESCRIPTION OF VIOLATION
 On the evening of 6/28/2018, Resident 1 was being combative during incontinence care. In response, Staff Person A placed wipes soiled with feces within inches of the face of Resident 1 and stated "keep it up" to Resident 1.

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 Member, [REDACTED] was immediately suspended from her duties by the administrator when this incident was reported on 6/30/18. An internal investigation occurred, and [REDACTED] employment with Elmcroft of Shippensburg was terminated on 7/3/2018. The staff member who witnessed the incident was placed on a performance improvement plan, due to her failure to immediately report what she witnessed to management.

On 7/27/2018, during a mandatory staff meeting, all staff present were re-educated on the following (ATTACHMENT):

- a). Resident Rights, in particular the right to refuse care.
- b). The use of Safe Management Techniques (2600.201) such as positive reinforcement and behavior modification techniques
- c). Prohibitions (2600.202)
- d). Resident right to Dignity and Respect (2600.42 (b) was concentrated upon)
- e). The requirement to report any suspected abuse to management immediately upon witnessing an incident

3 Associates were excused from the staff meeting on 7/27/2018, and were provided with a summary of what was discussed at the meeting (ATTACHMENT)

Annual in-services related to resident abuse and resident rights are assigned.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jennifer Kpe, Executive Director</i>	Date <i>8.3.2018</i>
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The above plan of correction is approved as of <u>8/3/18</u> (Date)	Plan of correction implementation status as of <u>8/3/18</u> (Date)
The above plan of correction was approved by <u>8/3/18</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