



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
February 19, 2019

Mr. Fred Wheeler
President
Wheeler Care Centers, Inc.
P.O. Box 70
Glenmore, Pennsylvania 19343

RE: Colonial Woods
1710 Creek Road
Glenmore, Pennsylvania 19343
License #: 198230

Dear Mr. Wheeler:

As a result of the Department's Bureau of Human Services Licensing Complaint/Incident inspection on October 17, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

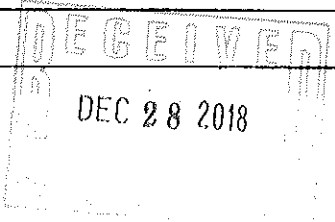
Sincerely,

A handwritten signature in black ink, appearing to read "Ayus Adelanwa".

Ayus Adelanwa
Workload Manager

Enclosure
Violation Report

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

PCH Name: COLONIAL WOODS		License Number: 19823
Address: 1710 CREEK ROAD, GLENMORE, PA 19343		County: Chester
Administrator: Mrs. Margaret Seitz		Region: SOUTHEAST
Legal Entity Name: WHEELER CARE CENTERS INC		
Legal Entity Address: P.O. BOX 70, GLENMORE, PA 19343		
Certificate(s) of Occupancy C-2 LP 04/11/1997 Dept L&I		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 22	Waking Staff: 17
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint, Incident		
On-Site Inspections Dates and Department Representatives On-Site 10/17/2018: Wooters, Sandra		
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: 31 Number of Residents Served: 21 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: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 3 Are 60 Years of Age or Older: 15 Have Mental Illness: 15 Have an Intellectual Disability: 0 Have a Mobility Need: 1 Have a Physical Disability: 0	

Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
 PCH Name: COLONIAL WOODS

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

2a. DESCRIPTION OF VIOLATION

Residents #1 and #2 reported staff member A called them hoarders and made them feel very upset. Staff member B verified that staff member A did indeed make the statement to the residents.

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.

IMMEDIATE: All residents are--and have always been--treated with dignity and respect. In the future another term analogy will be used when addressing issues of hoarding.

CORRECTIVE ACTION: Individuals who reside in co-shared rooms will be addressed using another term (other than 'hoarder') to maintain their space in a neat and orderly manner; free of clutter on the floor and to be respectful of their room mates space. All resident's room must be maintained without clutter and empty boxes so as to eliminate tripping over items by themselves; staff members, and, if necessary, first responders.

Within a month of receiving this POC, all staff shall be re-trained on residents abuse, neglect, and principles pertaining to dignity and respect as well as positive approach strategy. Administrator or designee will document the training and will ensure continual compliance with the cited reg. 2/15/19

AAA

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) IslaMae Allison, Manager/Administrator

Date 12/27/2018

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

The above plan of correction is approved as of 2/15/19
 (Date)

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

Plan of correction implementation status as of 2/15/19
 (Date)

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

Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
 PCH Name: COLONIAL WOODS

1. REGULATION 55 Pa.Code §2600
 2600.42(l) - A resident has the right to furnish his room and purchase, receive, use and retain personal clothing and possessions.

2a. DESCRIPTION OF VIOLATION
 Resident #2 reported that staff member A removed 14 cross stitch books and a family quilt without her permission during an unplanned room inspection / cleaning.

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.

IMMEDIATE: No items were removed from Resident#2 room without her full knowledge. Staff member A told the resident the books were never seen by herself. As for the family quilt-- that items was found by another resident in a cabinet occupied by Resident #2 boyfriend. Staff member A never moved either item.

CORRECTIVE ACTION: All staff members have been trained to give advance notice when a thorough cleaning of resident(s) rooms. The resident will be given ample time to address moving valuable items and storing them in a safe place when the staff member(s) are thoroughly cleaning to room to assure safety and respect of others in that room.

Within a month of receiving this POC, Administrator will ensure that staffs are retrained on resident's rights. Training will be documented. Administrator will ensure continual compliance. 2/15/19

A-A-A

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Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
PCH Name: COLONIAL WOODS

1. REGULATION 55 Pa.Code §2600

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Staff person C, whose first day of work was 07/09/2018, did not receive orientation in Fire Safety training until 07/20/18.

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.

IMMEDIATE: All staff members receive 12 hours of mandatory training on a office environment prior to training 'on the floor'. No employee works without receiving 2600.65(a) training first.

CORRECTIVE ACTION: Administrator will continue to follow established protocol by providing new staff members with 12 hours of mandatory training in an office environment prior to 'on the floor' training.

Within 15 days of receiving this POC, and quarterly thereafter, Administrator or a designee will review all staff's training record to ensure compliance with the referenced reg. A training checklist will be created to track and ensure that all staff receives the required trainings within the time specified in the reg 2600.65a. Training provided to staff shall be documented. 2/15/19

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Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
 PCH Name: COLONIAL WOODS

1. REGULATION 55 Pa.Code §2600
 2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:
 (1) Resident rights.
 (2) Emergency medical plan.
 (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
 (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION
 Staff member C completed their 40th scheduled work hour on 07/20/2018. The staff member did not receive orientation in Resident Rights.

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.

IMMEDIATE: All staff members receive 12 hours of mandatory training on a office environment prior to training 'on the floor'. No employee works without receiving 2600.65(a) training first.

CORRECTIVE ACTION: Administrator will continue to follow established protocol by providing new staff members with 12 hours of mandatory training in an office environment prior to 'on the floor' training.

Immediately and on receiving this POC, Administrator will ensure that staff person C completed the required resident rights training. Administrator or a designee will review all staff's training record to ensure compliance with the referenced reg. A training checklist will be created to track and ensure that all staff receives the required trainings within the time frame specified in the reg 2600.65a. Training provided to staff shall be documented. 2/15/19

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Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
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1. REGULATION 55 Pa.Code §2600
 2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

2a. DESCRIPTION OF VIOLATION
 On 10/16/18, A dog by the name of Bella was present in the home. The home does not have a current certificate of rabies vaccination for the dog.

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.

IMMEDIATE: The staff member who owned the dog produced the proper documentation immediately.

CORRECTION ACTION: Before a staff member is permitted to bring a pet on-site they will have to produce the proper documentation; which will be reviewed for accuracy.

The home's pet policy will be reviewed with all staff.2/15/19

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Violation Report: 19823 - 10/17/2018 - Wooters, Sandra
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1. REGULATION 55 Pa.Code §2600
 2600.221(b) - The program must provide social, physical, intellectual and recreational activities in a planned, coordinated and structured manner.

2a. DESCRIPTION OF VIOLATION
 The home's activities program does not include any social, intellectual and recreational activities. Multiple residents and staff stated the home never offers activities.

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.

IMMEDIATE: The Administrator produces an activity calendar monthly that includes social, physical and recreational activities. It is the Administrator's accountability to assure staff members following the schedules activities of the day.

CORRECTIVE ACTION: The Administrator has taken the responsibility to discuss the day's activities with the proper staff member; and; continues to follow-up to assure the schedule is followed.

Administrator will ensure that staff and residents are aware of planned intellectual or recreational activities for the day. Administrator will seek the residents' input on recreational or intellectual planned activities for the home. Administrator will continually maintain a calendar of activities and ensure that the same is updated. 2/15/19

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