



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

APR 16 2019

Ms. Robin Metzger  
Executive Director  
1 Woodcrest Circle  
Scottsdale, Pennsylvania 15683

RE: Woodcrest Senior Living Community  
Certificate #: 442120

Dear Ms. Metzger:

As a result of the Department's Bureau of Human Services Licensing annual inspection on January 10, 2019, 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.

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. 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".

Jacqueline L. Rowe  
Director

Enclosure  
Violation Report



MAR 15 2019

Violation Report: 44212 - 01/10/2019 - Klein, Scott  
 PCH Name: WOODCREST SENIOR LIVING COMMUNITY

Western Region

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 contract dated 2/1/16 for resident #1 states that the home will provide assisted living services. Act 56 of 2007 requires that "no person, organization, or program shall use the term 'assisted living' in any name or written material" unless the person, organization, or program is an assisted living residence licensed in accordance with 55 Pa. Code Chapter 2800 (relating to assisted living residences). The contract, dated 2/1/16, for resident #1 states that the home will provide assisted living services

Act 56 of 2007 requires that "no person, organization, or program shall use the term 'assisted living' in any name or written material" unless the person, organization, or program is an assisted living residence licensed in accordance with 55 Pa. Code Chapter 2800 (relating to assisted living residences). The contract, dated 8/31/18, for resident #2 states that the home will provide assisted living services.

Act 56 of 2007 requires that "no person, organization, or program shall use the term 'assisted living' in any name or written material" unless the person, organization, or program is an assisted living residence licensed in accordance with 55 Pa. Code Chapter 2800 (relating to assisted living residences). The contract, dated 8/1/18, for resident #3 states that the home will provide assisted living services.

Act 56 of 2007 requires that "no person, organization, or program shall use the term 'assisted living' in any name or written material" unless the person, organization, or program is an assisted living residence licensed in accordance with 55 Pa. Code Chapter 2800 (relating to assisted living residences). The contract, dated 3/13/14, for resident #4 states that the home will provide assisted living services.

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.

See Attached POC 2600.18, Education, Audit, and Contract.

See Page 2A of 5

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Robin Metzger Executive Director* Date *3-13-19*

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

The above plan of correction is approved as of 3/22/19 (Date)

Plan of correction implementation status as of 3/22/19 (Date)

The above plan of correction was approved by *EJ* (Initials)

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

# WOODCREST



## SENIOR LIVING COMMUNITY

1 Woodcrest Circle | Scottsdale, PA 15683 | 724.887.3773

Page 2A of 5

### Violation report 44212 Woodcrest Senior Living Community

2600.18 A home shall comply with applicable Federal, state and local laws, ordinances and regulations.

#### ADMISSION CONTRACT LANGUAGE

1. The admission contract was reviewed for contract language. The contract language was corrected to meet licensing standards.
2. All marketing and website tools have been reviewed for any language that needs to be corrected to meet Personal Care regulations. All informational communication has been corrected.
3. Administration has been educated on proper contract language.
4. Audits of any new contracts marketing information and/or marketing material will be done prior to being put into use. Annual review of all contracts will be completed.
5. Audits will be reported to the QAPI committee as needed for review by the Administrator/designee.
6. Completion date: 3-7-2019

3/22/19 

Robin Metzger  
Robin Metzger Exec. Dir.  
3/13/19

MAR 15 2019

Violation Report: 44212 - 01/10/2019 - Klein, Scott  
 PCH Name: WOODCREST SENIOR LIVING COMMUNITY

**Western Region**

**1. REGULATION 55 Pa.Code §2600**

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

**2a. DESCRIPTION OF VIOLATION**

Ancillary staff person B, hired 8/9/13, does not complete the required annual training in Resident rights, Older Adult Protective Services Act (OAPSA), or Falls and accident prevention during the 2018 training year.

**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.*

*See Attached: POC 2600.65, Education, Audit (2 pages),  
 QVAPI (3 pages)*

See Page 3A of 5

Repeat Violation: Yes	Date(s) of Previous Violation(s):	01/17/2018	
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Robin Metzger, Executive Dir.* Date *3/13/19*

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The above plan of correction was approved by <u><i>[Signature]</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>[Signature]</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

# WOODCREST

## SENIOR LIVING COMMUNITY

1 Woodcrest Circle | Scottsdale, PA 15683 | 724.887.3773

Page 3A of 5

2600.65 Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually on the 6 areas noted.

### ANNUAL EMPLOYEE EDUCATION TRAINING

1. A review of the employee file for Employee B was conducted, and in-service education was provided to this employee on 2-6-2019.
2. A review of all employee personnel files was completed on 2-11-2019 to ensure that all education was complete. All 6 areas of education have been provided to the employees.
3. Administration was educated on education requirements for employees on 2-6-2019N.
4. Audits will be conducted annually by the Administrator/designee to ensure that each employee has completed the required education relative to the work place.
5. Audits will be reported to the QAPI committee monthly for review by the Administrator/designee.
6. Completion date: 3-7-2019

3/22/19 

Robin Metzger  
Beth Hoffman Exec. Dir  
3/13/19

MAR 15 2019

Violation Report: 44212 - 01/10/2019 - Klein, Scott  
PCH Name: WOODCREST SENIOR LIVING COMMUNITY

Western Region

1. REGULATION 55 Pa.Code §2600

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION

Resident #2's 8/31/18 initial assessment describes the resident as being independent; however, the support plan indicates that the resident's family assists with completing the following:

- \* Managing healthcare
- \* Securing healthcare
- \* Securing and using transportation
- \* Shopping
- \* Obtaining seasonal clothing

Resident #3's 8/7/18 initial assessment describes the resident as being independent; however, the support plan indicates that the resident's family assists with completing the following:

- \* Managing healthcare .
- \* Securing healthcare
- \* Securing and using transportation
- \* Shopping
- \* Obtaining seasonal clothing

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.

See Attached: POC 2600.225(a), Education, Audit, Q U A P I (3 pages)

See Page 4A of 5

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Robin Metzger, Exec. Director</i>	Date <i>3/13/19</i>
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# WOODCREST



## SENIOR LIVING COMMUNITY

1 Woodcrest Circle | Scottsdale, PA 15683 | 724.887.3773

Page 4A of 5

2600.225(a) A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The Administrator or designed, or a human service agency may complete the initial assessment.

### CONSISTENT, TIMELY AND ACCURATE REFLECTION ON THE RESIDENT ASSESSMENT-SUPPORT PLAN RELATIVE TO THE RESIDENTS ABILITIES.

1. A review of the Resident Assessment -Support Plan (RASP) for residents # 2 and #3 was completed with physician notified and corrections made. There was no harm to the resident.
2. An audit was done for each resident to review accuracy of The Resident Assessment-Support Plan (RASP) relevant to the resident's abilities, all Resident Assessment-Support Plans (RASP) for residents has been verified to be accurate. Completed on 1-25-2019.
3. Care Staff education will be provided by the Administrator to ensure that the "RASP" accurately reflects the resident's abilities and that physician must be notified should the residents abilities not reflect the Residents Assessment -support Plan (RASP).
4. Upon initial, annual, significant change and department request the Resident Assessment-Support Plan (RASP) will be reviewed and assessed by the RN/designee and validated by the administrator for accuracy.
5. An audit of The Resident Assessment-Support Plan will be ongoing, issues that may arise will be reported to the QAPI committee by the RN/designee for review.
6. Completion Date: 3-7-2019

3/22/19



Robin Metzger  
Exec Dir  
3/13/19

Violation Report: 44212 - 01/10/2019 - Klein, Scott  
 PCH Name: WOODCREST SENIOR LIVING COMMUNITY

MAR 15 2019

**1. REGULATION 55 Pa.Code §2600**

Western Region

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

**2a. DESCRIPTION OF VIOLATION**

Resident #1's annual assessment, dated 7/20/18, describes the resident as being independent; however, the support plan indicates that the resident's family assists with completing the following:

- \* Managing healthcare
- \* Securing healthcare
- \* Securing and using transportation

**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.*

*See Attached: POC 2600.225 (c), Education, Audit, QUAPI (3 pages).*

See Page 5A of 5

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

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *ROBIN METZGER, EXEC. DIRECTOR* Date *3/13/19*

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 (Date)

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 (Date)

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 (Initials)

# WOODCREST



## SENIOR LIVING COMMUNITY

1 Woodcrest Circle | Scottdale, PA 15683 | 724.887.3773

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2600.225(c) The resident shall have additional assessments annually, if the condition of the resident significantly changes prior to the annual assessment and at the request of the Department upon cause to believe that an update is required.

### CONSISTENT AND ACCURATE REFLECTION ON THE RESIDENT ASSESSMENT-SUPPORT PLAN RELATIVE TO THE RESIDENTS ABILITIES.

1. A review of the Resident Assessment -Support Plan (RASP) for resident # 1 was completed with physician notified and corrections made. There was no harm to the resident.
2. An audit was done for each resident to review accuracy of The Resident Assessment-Support Plan (RASP) relevant to the resident's abilities, all Resident Assessment-Support Plans (RASP) for residents has been verified to be accurate. Completed on 1-25-2019.
3. Care Staff education will be provided by the Administrator to ensure that the "RASP" accurately reflects the resident's abilities and that physician must be notified should the residents abilities not reflect the Residents Assessment -support Plan (RASP).
4. Upon initial, annual, significant change and department request the Resident Assessment-Support Plan (RASP) will be reviewed and assessed by the RN/designee and validated by the administrator for accuracy.
5. An audit of The Resident Assessment-Support Plan will be ongoing, issues that may arise will be reported to the QAPI committee by the RN/designee for review.
6. Completion Date: 3-7-2019.

3/22/19

*Ej*

*Robin Metzger*  
*Robin Metzger* Exec Dir  
3/13/19