



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 05 2019

Ms. Janet Stockhausen
Compliance Officer
Paramount Senior Living at Fayetteville LLC
3025 Washington Road, Suite 201
McMurray, Pennsylvania 15317

RE: Paramount Senior Living at Stonebrook
6361 Chambersburg Road
Fayetteville, Pennsylvania 17222
Certificate #: 333840

Dear Ms. Stockhausen:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on January 23, 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.

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

Violation Report: 33384 - 01/23/2019 - Springs, Israel
 PCH Name: PARAMOUNT SENIOR LIVING AT STONEBROOK

1. REGULATION 55 Pa.Code §2600
 2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:
 (1) Medication self-administration training.
 (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
 (3) Care for residents with dementia and cognitive impairments.
 (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
 (5) Personal care service needs of the resident.
 (6) Safe management techniques.
 (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION
 Staff Member A did not receive training in "Instruction on meeting the needs of the residents as described in the preadmission screening for, assessment tool, medical evaluation and support plan" 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.

Staff member A was in serviced on regulation 2600.65 on instructions of meeting the needs of the residents as described in the preadmission screening, medical evaluation and support plan.

All new hires will be in serviced at time of hire and yearly thereafter.

Administrator and or designee will audit all employee files to ensure compliance.

Administrator and or designee will complete an audit monthly to ensure all staff are compliant with in services and monthly meetings.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Christine Gorby*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Christine Gorby PCHA</i>	Date <i>2-1-2019</i>
---	----------------------

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

The above plan of correction is approved as of <u>2/4/19</u> (Date) The above plan of correction was approved by <u>BAS</u> (Initials)	Plan of correction implementation status as of <u>2/4/19</u> (Date) <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
---	---

Violation Report: 33384 - 01/23/2019 - Springs, Israel
 PCH Name: PARAMOUNT SENIOR LIVING AT STONEBROOK

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION
 The Documentation of Medical Evaluation form for Resident #1's 12/28/18 medical evaluation does not assess the resident's level of cognitive functioning.

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.

A revised medical evaluation has been completed on resident #1.

All residents' medical evaluations will be reviewed to ensure they are accurately completed.

Administrator will in service and educate staff related to regulation 2600.141(a)(2) medical evaluation at time of hire and yearly thereafter.

Administrator and or designee will randomly audit all new admissions, readmits and significant changes to ensure compliance is achieved.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Christine Gorby*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Christine Gorby PCHA</i>	Date <i>2-1-2019</i>
---	----------------------

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

The above plan of correction is approved as of <u>2/4/19</u> (Date)	Plan of correction implementation status as of <u>2/4/19</u> (Date)
The above plan of correction was approved by <u>BAS</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