



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]

Sent via e-mail [REDACTED]

April 15, 2019

Mr. Matthew Jahraus
Authorized Representative
Statesman Woods AID OPCO, LLC
2619 Trenton Road
Levittown, Pennsylvania 19056

RE: Woodbourne Place
License #: 139550

Dear Mr. Jahraus:

As a result of the Department's Bureau of Human Services Licensing inspection on January 24, 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.

Sincerely,

A handwritten signature in black ink that reads "Mia Johnson".

Mia Johnson
Human Services Licensing Supervisor

Enclosure
Violation Report

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

PCH Name: WOODBOURNE PLACE		License Number: 13955
Address: 2619 TRENTON ROAD, LEVITOWN, PA 19056		County: Bucks
Administrator: ANGELA CORBET		Region: SOUTHEAST
Legal Entity Name: STATESMAN WOODS AID OPCO LLC		
Legal Entity Address: 2619 TRENTON ROAD, LEVITOWN, PA 19056		
Certificate(s) of Occupancy Other NOT MEASURED		
Staffing Hours Resident Support: 0 Total Daily Staff: 57 Waking Staff: 43		
Type of Inspection: Partial BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 01/24/2019: Braswell, Natasha		
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: 48 Number of Residents Served: 48 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: 1 Number of Hospice Residents in past year: 12	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 0 Have Mental Illness: 1 Have an Intellectual Disability: 0 Have a Mobility Need: 9 Have a Physical Disability: 1	

Violation Report: 13965 - 01/24/2019 - Braswell, Natasha
PGH Name: WOODBOURNE PLACE

1. REGULATION 56 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION
Staff person A became verbally aggressive and confrontational with resident #1 on 12/30/18 about having a second piece of cake.

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 person A is no longer employed at the community as 1/30/2019

Current staff was re-trained on Resident Rights and treating residents with respect and dignity on 1/23/2019 at the monthly in-service

Resident Rights are reviewed and signed by new employees at the time of orientation and during the year as needed

Within 30 days of receipt of this POC all staff including direct care staff and management staff will receive training in resident rights, and the prevention of resident abuse by an outside source approved by the department such as the Area Agency on Aging. Maintain audits for Department review for a period of three years 4/13/19 *MJ*

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

Signature of Legal Entity Representative (Required on EVERY Page) *Angela Corbett*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Angela Corbett* Date *4/8/19*

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

The above plan of correction is approved as of 4/13/19 (Date)

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

Plan of correction Implementation status as of 4/16/19 (Date)

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

Violation Report: 13955 - 01/24/2019 - Braswell, Natasha
 PCH Name: WOODBOURNE PLACE

1. REGULATION 55 Pa.Code §2800

2800.65(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 person A could not provide documentation that she was trained in the area of residents' 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.

Staff person A is no longer employed at the community as 1/30/2019

Current staff was re-trained on Resident Rights and treating residents with respect and dignity on 1/23/2019 at the monthly in-service

Administrative Specialist was re-trained on the New Hire Orientation procedure by the Executive Director on 1/25/2019

Resident Rights are reviewed and signed by new employees at the time of orientation and during the year

Audit conducted on 2/4/2019 to ensure new hires and current staff received Resident Right training. Monitoring will be ongoing as needed

Maintain audits for Department review for a period of three years 4/13/19 *MSJ*

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Angela Corbett* Date: *4/8/19*

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The above plan of correction is approved as of 4/13/19
 (Date)

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

Plan of correction implementation status as of 4/13/19
 (Date)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 13965 - 01/24/2019 - Braswell, Natasha
 PCH Name: WOODBOURNE PLACE

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

The assessment for resident #1 does not indicate the resident has a need for intervention due to confrontational behaviors.

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 Service Plan was updated on 1/24/2019 by the Care Services Manager

Care Services Manager was re-trained on requirements on 1/25/2019 by Executive Director

Care Services Manager is responsible to sustain compliance

Executive Director/Designee Person will review Support Plans monthly x3 months to ensure compliance.

Monitoring will be ongoing.

Maintain audits for Department review for a period of three years 4/13/19 *MSJ*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Angela Corbett

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

Angela Corbett

Date

4/8/19

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