



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]  
MAILING DATE: April 11, 2019

Mr. Chuck Gray  
Member  
Senior Care of Kulpmont LLC  
6157 28<sup>th</sup> Street SE, 7  
Grand Rapids, Michigan 49546

RE: Serenity Gardens at Mount Carmel  
135 Vermont Drive  
Kulpmont, Pennsylvania 17834  
License #: 226790

Dear Mr. Gray:

As a result of the Department's Bureau of Human Services Licensing inspection on February 1, 2019 of the above facility, the citations 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 "M. Moskalczyk".

Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Violation Report



Violation Report: 22679 - 02/01/2019 - O'Haire, Anne  
 PCH Name: SERENITY GARDENS AT MOUNT CARMEL

**1. REGULATION 55 Pa.Code §2600**  
 2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

**2a. DESCRIPTION OF VIOLATION**  
 Resident #1 made an allegation of sexual abuse to the home's staff on 01-05-19. However, the home failed to report this incident to the department within the required time limits.

**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

Repeat Violation: Yes	Date(s) of Previous Violation(s):	09/27/2018		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Jessica Kross*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jessica Kross</i>	Date <i>3-28-19</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>4-9-19</u> (Date)	Plan of correction implementation status as of <u>4-9-19</u> (Date)
The above plan of correction was approved by <u>MM</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

On Saturday 1/5/19 the resident listed came to a first shift PCA and made an allegation of sexual abuse from the night before. The facility investigated on their own and received statements from all prior nursing shifts dating back to 1/3/19. The POA was informed and told the home that his mother has a history of hallucinations due to her dementia and would make similar allegations when she was living at home with them. He also stated this was one of the reasons why they began looking to move her into our secure dementia unit. Do to no evidence being found, the home waited to call Area on Aging until Monday 1/7/19 and questioned if it needed to be reported, to which it was explained that it is a mandated reportable no matter the circumstances. Once it was reported, a formal investigation through Area on Aging, Mount Carmel police, and the department of human services was conducted. No evidence of foul play was reported to the home. As a facility our resident's safety is our top priority and we understand regardless the situation, allegations of sexual abuse must be reported to the appropriate agencies.

1. For the safety and well-being of the residents, the home shall report any type of abuse within 24 hours.
2. Annual trainings on mandated reporting through area on aging are conducted at the facility for the staff.
3. All staff are aware they are mandated reporters and are educated to call the administrator or director of wellness when suspected abuse has occurred. Either the administrator, director of wellness, or employee in charge will call area on aging and report, if necessary, to the appropriate agencies.

4-9-19

*MM*

**Violation Report:** 22679 - 02/01/2019 - OHaire, Anne  
**PCH Name:** SERENITY GARDENS AT MOUNT CARMEL

**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**  
 Resident #1's (RASP) resident assessment and support plan dated 7/24/18, did not include information regarding the formal support services or physical therapy services which the resident is receiving - 2x weekly.

**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.*

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This on-site inspection was conducted on 2/1/19 to which the DHS representative informed the home that the resident's RASP was not up-to-date. On 2/6/19 the home conducting an audit to ensure all RASP forms were updated.

1. To ensure that each resident's needs are met and that there is documentation to show those needs are firmly established within the facility.
2. Director of wellness and dementia care coordinator will ensure RASP forms are properly updated when new order/needs come in for the residents.
3. A training was conducted on 3/5/19 for documentation and RASP forms to the certified nursing staff.

4-9-19

*MM*