



MAILING DATE: May 17, 2019

Ms. Janet Stockhausen
Compliance Officer
Paramount Senior Living at Bethel Park, LLC.
5785 Baptist Road
Bethel Park, Pennsylvania 15102

RE: Paramount Senior Living at Bethel Park
Certificate #: 440880

Dear Ms. Stockhausen:

As a result of the Department's Bureau of Human Services Licensing inspection on February 15, 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,

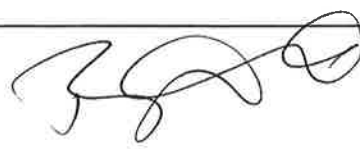
A handwritten signature in black ink, appearing to read "Janine Wenzig", written in a cursive style.

Janine Wenzig
Human Services Licensing Supervisor

Enclosure
Violation Report

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

PCH Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK		License Number: 44088
Address: 5785 BAPTIST ROAD, BETHEL PARK, PA 15102		County: Allegheny
Administrator: Tony Chapla		Region: WEST
Legal Entity Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK LLC		
Legal Entity Address: 5785 BAPTIST ROAD, BETHEL PARK, PA 15102		
Certificate(s) of Occupancy I-1 10/29/2009 Municipality Bethel Park		RECEIVED MARCH 23 2019 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 129	Waking Staff: 97
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 02/15/2019: McConnell, Deb		
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: 125 Number of Residents Served: 91 Secured Dementia Care Unit in Home: Yes Area: Memory Care Secured Dementia Unit Capacity, if Applicable: 28 Number of Residents Served in Secured Dementia Care Unit, if applicable: 20 Number of Current Hospice Residents: 8 Number of Hospice Residents in past year: 48	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 91 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 38 Have a Physical Disability: 0	

 3/15/19

Violation Report: 44088 - 02/15/2019 - McConnell, Deb
PCH Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 12/28/19, resident #1 reported to staff person A, the administrator, that on the night of 12/27/18, she took her ring off and in the morning it gone. The resident's family notified the police and an investigation began. On 1/14/19, the police notified the home that staff person B was identified as a suspect in the theft of the ring and possible theft of other jewelry. On 1/14/19, the home started an internal investigation and terminated the employee on 1/15/19. On 1/18/19, staff person B was charged by the police with Burglary, Theft By Unlawful Taking and Receiving Stolen Property regarding the resident's ring. The home did not report the allegation to the local Area Agency on Aging until 2-15-19.

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.

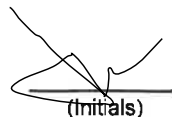
see attachment #1 PAGE 2A OF 3

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *ALICE PALADINI DIR OPERATIONS* **Date** *3/15/19*

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

The above plan of correction is approved as of <u>5/9/19</u> (Date) The above plan of correction was approved by  (Initials)	Plan of correction implementation status as of <u>5/9/19</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
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Plan of Correction
for
Paramount Senior Living at Bethel Park
Attachment #1

Regulation 2600.15(a)

I would like DHS is considered withdrawal of this violation. When Tony Chapla was initially informed by the Licensing Representative from the Department of Human Services that this incident needed to be reported to Adult Protective Services, Tony called APS that same day. They informed him that this type of event did not to be reported to them and they refused to take the report. Tony asked the representative from Adult Protective Services to discuss with her supervisor, which she did. Alec Finocchio, the supervisor, agreed that this type of incident did not need to be called in to APS. The representative from Protective s Services told Tony that if he had called it in, she would have instructed him to work with the local police department, which he did. She said that as far as she is concerned, Tony did everything I could have done in this event. Tony then had the initial representative from discuss this with the Licensing Representative present in the facility from DHS.

The following steps will be taken:

1. By 4/30/19, All staff members will be re-educated on the Older Adult Protective Services Act. Documentation will be kept for this education.
2. Repeat the above mentioned education each month for the next 2 months (May and June) to all staff (Documentation will be kept).
3. Facility will continue to train all new hires in accordance to 2600.25b3 and continue to train all staff annually on 2600.65g4. Documentation is kept.
4. Executive Administrator will interview 15 employees per month for 3 months at random to audit for reportable incidents. Documentation will be kept.

The administrator will ensure all suspected abuse, including financial exploitation, is reported to the Area Agency on Aging in accordance with OAPSA. -- JRW 5/9/19


Rolco PALLADINI
Dir. Operations



5/9/19

Violation Report: 44088 - 02/15/2019 - McConnell, Deb
PCH Name: PARAMOUNT SENIOR LIVING AT BETHEL PARK

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

On 12/28/19, resident #1 reported to staff person A, the administrator, that on the night of 12/27/18, she took her ring off and in the morning it gone. The resident's family notified the police and an investigation began. On 1/14/19, the police notified the home that staff person B was identified as a suspect in the theft of the ring and possible theft of other jewelry. On 1/14/19, the home started an internal investigation and terminated the employee on 1/15/19. On 1/18/19, staff person B was charged by the police with Burglary, Theft By Unlawful Taking and Receiving Stolen Property regarding the resident's ring.

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 attachment # 2 PAGE 3A of 3

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Rocco PALLADINI DIR OPERATIONS</u>	Date <u>3/15/19</u>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5/9/19
 (Date)

The above plan of correction was approved by 
 (Initials)

Plan of correction implementation status as of 5/9/19
 (Date)

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

Plan of Correction
for
Paramount Senior Living at Bethel Park
Attachment #2

I would like DHS is considered withdrawal of this violation. When Tony Chapla was initially informed by the Licensing Representative from the Department of Human Services that this incident needed to be reported to Adult Protective Services, Tony called APS that same day. They informed him that this type of event did not to be reported to them and they refused to take the report. Tony asked the representative from Adult Protective Services to discuss with her supervisor, which she did. Alec Finochio, the supervisor, agreed that this type of incident did not need to be called in to APS. The representative from Protective s Services told Tony that if he had called it in, she would have instructed him to work with the local police department, which he did. She said that as far as she is concerned, Tony did everything I could have done in this event. Tony then had the initial representative from discuss this with the Licensing Representative present in the facility from DHS. When the facility became aware of a missing item initially, there was no suspect and therefore cannot be abuse or a stolen item at the time. The facility cooperated fully with local police and assisted their ability to bring charges to a suspect. A suspect was identified and charged (not convicted) with receiving stolen property. The suspect in question had no criminal record upon hire with the facility.

The facility feels that missing item reports do not need to be reported as abuse, but feel the facility with help from local police can conduct a proper investigation.

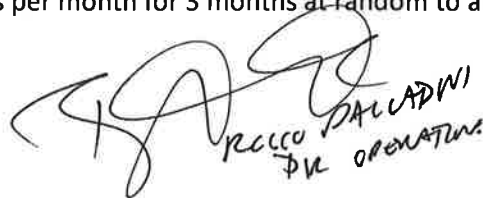
Regulation 2600.42(b)

The following steps will be taken:

1. By 4/30/19, All staff members will be re-educated Resident Rights, types of abuse, and proper reeducation for residents to encourage securing personal items. Documentation will be kept for this education.
2. At the next 3 Resident Councils, the facility will educate residents on importance of keeping valuables secured and provide options for the residents.
3. Repeat the above-mentioned education each month for the next 2 months (May and June) to all staff (Documentation will be kept).
4. Facility will continue to train all employees upon hire and annually on resident rights and abuse. Documentation is kept.
5. Facility will continue to perform criminal background checks on all employees at hire.
5. Executive Administrator will interview 15 residents per month for 3 months at random to audit for reportable incidents. Documentation will be kept.



5/9/19



RECEIVED BY OPERATIONS