



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT  
REQUESTED April 18, 2019**

Mr. Daniel Murray  
Chief Executive Officer  
Pennswood Village  
1382 Newtown-Langhorne Road  
Newtown, Pennsylvania 18940

RE: Pennswood Village Personal Care Home  
License #: 126750

Dear Mr. Murray:

As a result of the Department's Bureau of Human Services Licensing Incident inspection on February 27, 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.

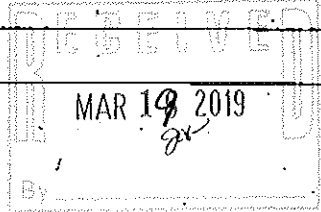
Sincerely,

A handwritten signature in black ink, appearing to read "Ayus Adelanwa".

Ayus Adelanwa  
Workload Manager

Enclosure  
Violation Report

**VIOLATION REPORT  
PERSONAL CARE HOMES - 56 Pa.Code Chapter 2600**

|   |  |   |
|---|--|---|
| PGH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME  |  | License Number: 12875   |
| Address: 1382 NEWTOWN LANGHORNE ROAD, NEWTOWN, PA 18940   |  | County: Bucks   |
| Adminstrator: Daniela Pantal  |  | Region: SOUTHEAST   |
| Legal Entity Name: PENNSWOOD VILLAGE  |  |   |
| Legal Entity Address: 1382 NEWTOWN-LANGHORNE ROAD, NEWTOWN, PA 18940  |  |   |
| Certificate(s) of Occupancy<br>C-1<br>09/03/1993<br>Dept of Health  |  |    |
| Staffing Hours<br>Resident Support: 0                      Total Daily Staff: 37                      Working Staff: 28   |  |   |
| Type of Inspection: Partial                      BHA Docket Number:                      Notice: Unannounced  |  |   |
| Reason(s) for Inspection(s)<br>Incident   |  |   |
| On-Site Inspections Dates and Department Representatives On-Site<br>02/27/2019: Chung, Youn Hie   |  |   |
| Off-Site Inspection Dates and Inspectors, If Applicable   |  |   |
| Other Details<br>Partial or Full Triggers:                      Random Indicators:  |  |   |
| Resident Demographic Data as of Inspection Dates  |  |   |
| Licensed Capacity: 37<br>Number of Residents Served: 32<br>Secured Dementia Care Unit in Home: No<br>Area:<br>Secured Dementia Unit Capacity, If Applicable:<br>Number of Residents Served in Secured Dementia Care Unit, If applicable:<br>Number of Current Hospice Residents: X<br>Number of Hospice Residents in past year: X |  | Number of Residents who:<br>Receive Supplemental Security Income: 0<br>Are 80 Years of Age or Older: 32<br>Have Mental Illness: 0<br>Have an Intellectual Disability: 0<br>Have a Mobility Need: 5<br>Have a Physical Disability: 0 |

Violation Report: 12676 - 02/27/2019 - Chung, Youn Hie  
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 68 Pa. Code §2600  
 2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION

Resident #1 had an incontinence accident in her bathroom sometime between Christmas 2018 and New Years Day 2019. Staff person A spoke to the resident in a loud, condescending manner. The resident doesn't feel comfortable around the staff anymore.

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 was terminated following Department Of Human Services and facility investigation of alleged incident. Department of Human Services stated that resident's right of being treated with dignity and respect was violated by staff member as indicated by citation. Incident was reviewed at Staff meeting and staff was educated on residents rights on 1/30/19 Residents rights continue to be assigned annually to all staff and resident rights are reviewed at monthly resident council meetings. Moving forward Residents' rights will also be reviewed at staff meetings. All deficiencies will be reviewed at quarterly Quality Assurance Performance Improvement (QAPI) meetings. The home is in compliance with regulation 2600.42(c).

On receiving this POC, and for the next two consecutive months, the Administrator will provide oversight to staff regarding the ADL's for resident #1; to ensure that the resident is being treated with dignity and respect. Equally, the Administrator will use the period of oversight to re-train staff on how to properly provide care for the resident and thus promote the resident's well-being. The training, re-training and other applicable education provided to staff on the care of resident #1 will be documented. 4/15/19

AAA

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

Signature of Legal Entity Representative (Required on EVERY Page) *Daniella Pantala*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Daniella Pantala Date 3/19/19

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

The above plan of correction is approved as of 4/15/19  
 (Date)

The above plan of correction was approved by AAA  
 (Initials)

Plan of correction implementation status as of 4/15/19  
 (Date)

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

Violation Report: 12676 - 02/27/2019 - Chung, Youn Hie  
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

**1. REGULATION 55 Pa. Code §2000**

2800.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

**2a. DESCRIPTION OF VIOLATION**

The pre-admission screening forms for residents #1 and #2, admitted 08/22/2018 and 11/7/2018 respectively, does not include a determination that the home can meet the service needs of the residents.

**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.*

The incident was reviewed with appropriate staff. An audit of all of the current residents' charts was completed on 3/13/19. Moving forward the PCHA and/or designee will monitor to ensure compliance. This will be reviewed at quarterly Quality Assurance Performance Improvement (QAPI) meetings. The home is in compliance with regulation 2600.224.

Administrator or a designee will develop a checklist that will prompt the need for completing the pre-admission form as stipulated in the cited reg. The Pre-admission form will also be reviewed by the Administrator or a designated person once completed. The Administrator will document the quarterly review of resident's record. 4/15/19

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *[Handwritten Signature]*

|  |                     |
|--|---------------------|
| Printed Name and Title of Legal Entity Representative<br>(Required on EVERY Page) <i>Daniella Pantal</i> | Date <i>3/19/19</i> |
|--|---------------------|

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

The above plan of correction is approved as of 4/15/19  
 (Date)

The above plan of correction was approved by AAA  
 (Initials)

Plan of correction implementation status as of 4/15/19  
 (Date)

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

Violation Report: 12875 - 02/27/2019 - Chung, Youn Hie  
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

**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**  
 The initial assessment for resident #1, admitted 06/22/2018, was completed on 07/09/2018.

**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.*

The incident was reviewed with appropriate staff. An audit of all of the current residents' charts was completed 3/13/19. Moving forward the PCHA and/or designee will monitor to ensure compliance. This will be reviewed at quarterly Quality Assurance Performance Improvement (QAPI) meetings. The home is in compliance with regulation 2600.225(a).

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Daniella Pantal*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Daniella Pantal* Date *3/19/19*

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

|   |   |
|---|---|
| The above plan of correction is approved as of <u>4/15/19</u><br>(Date) | Plan of correction implementation status as of <u>4/15/19</u><br>(Date)   |
| The above plan of correction was approved by <u>A.A.A</u><br>(Initials) | <input type="checkbox"/> Fully Implemented<br><input checked="" type="checkbox"/> Partially Implemented - Adequate Progress<br><input type="checkbox"/> Partially Implemented - Inadequate Progress<br><input type="checkbox"/> Not Implemented |