



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 15 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
Chambersburg Road
6375 Chambersburg Road
Fayetteville, Pennsylvania 17222
Certificate #: 333830

Dear Ms. Stockhausen:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on March 11, 2019 and March 12, 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
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

PCH Name: PARAMOUNT SENIOR LIVING AT CHAMBERSBURG ROAD		License Number: 33383
Address: 6375 CHAMBERSBURG ROAD, FAYETTEVILLE, PA 17222		County: Adams
Administrator: Christine Gorby		Region: CENTRAL
Legal Entity Name: PARAMOUNT SENIOR LIVING AT FAYETTEVILLE LLC		
Legal Entity Address: 3025 WASHINGTON RD SUITE 201, MCMURRAY, PA 15317		
Certificate(s) of Occupancy C-2 LP 10/28/2010 Sea & Land Inc		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 87	Waking Staff: 65
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
03/11/2019: Springs, Israel		
03/12/2019: Springs, Israel		
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: 100 ✓ Number of Residents Served: 68 ✓ Secured Dementia Care Unit in Home: Yes Area: Memory Care Secured Dementia Unit Capacity, if Applicable: 24 Number of Residents Served in Secured Dementia Care Unit, if applicable: 18 ✓ Number of Current Hospice Residents: 4 ✓ Number of Hospice Residents in past year: 4 ✓	Number of Residents who: Receive Supplemental Security Income: 4 Are 60 Years of Age or Older: 68 Have Mental Illness: 2 Have an Intellectual Disability: 2 Have a Mobility Need: 19 Have a Physical Disability: 1	

Violation Report: 33383 - 03/11/2019 - Springs, Israel
 PCH Name: PARAMOUNT SENIOR LIVING AT CHAMBERSBURG ROAD

1. REGULATION 55 Pa.Code §2600
 2600.65(i) - A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

2a. DESCRIPTION OF VIOLATION

The home did not maintain a record for Staff Member A's and Staff Member B's initial orientation and training required in regulations 2600.65(a) and 2600.65(b).
 The home did not maintain a record of Staff Member C's and Staff Member D's 2018 annual training in "Emergency preparedness procedures..." and "Fire safety" required in regulation 2600.65(g).

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 and B will sign initial in service and training required 2600.65(a) and 2600.65(b), it will then be placed in their file at that time.

All new hires will be in serviced and sign all documentation for initial orientation and training required and then placed into their file immediately.

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

Staff member C and D will sign Emergency preparedness procedures and Fire Safety regulations in service documentation required in regulation 2600.65(g)

All new hires will sign documentation for Emergency preparedness procedure and Fire Safety directly after in service and yearly thereafter.

HR and or designee will audit to ensure all employees have signed documentation in regulation 2600.65(g).

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Christine Garby PCHA* Date *3/25/19*

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

The above plan of correction is approved as of 3/26/19
 (Date)

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

Plan of correction implementation status as of 3/26/19
 (Date)

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

Violation Report: 33383 - 03/11/2019 - Springs, Israel
 PCH Name: PARAMOUNT SENIOR LIVING AT CHAMBERSBURG ROAD

1. REGULATION 55 Pa.Code §2600
 2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

2a. DESCRIPTION OF VIOLATION
 A container of Ibuprofen 200mg and a container of Hydrocerin Cream were located in an unlocked medicine cabinet in the unlocked bedroom of Resident #1. The resident was not in the bedroom at the time of this observation.

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 Ibuprofen and container of Hydrocerin Cream were removed immediately from the medicine cabinet of resident #1 per regulation 2600.183(b).

The family of resident #1 was called as well as an announcement made at the town meeting to all residents in attendance, that all prescription medications, creams etc. cannot be stored in the rooms and have to be locked in the medication or treatment carts.

Administrator and or designee will audit all residents' rooms for OTC or prescription medications or creams monthly to ensure compliance.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Christine Gorby PCHN* Date *3/25/19*

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