



Sent via e-mail to: susans@abingtonmanor.com
MAILING DATE: July 11, 2019

Ms. Susan Sartoretto
Owner
Cedar Park Assisted Living, LLC
4161 Walter Road
Bethlehem, Pennsylvania 18020

RE: Abington Manor at Morgan Hill
215 Cedar Park Boulevard
Easton, Pennsylvania 18042
License #: 219620

Dear Ms. Sartoretto:

As a result of the Department's Bureau of Human Services Licensing inspection on April 30, 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 "M. Moskalczyk".

Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *ABINGTON MANOR AT MORGAN HILL*
 Address: *215 CEDAR PARK BOULEVARD, EASTON, PA 18042*
 County: *NORTHAMPTON* Region: *NORTHEAST*

License Number: *219620*

Administrator

Name: *Diane Dellocono* Phone: *6108290100* Email: *SUSANS@ABINGTONMANOR.COM*

Legal Entity

Name: *CEDAR PARK ASSISTED LIVING LLC*
 Address: *215 CEDAR PARK BOULEVARD, PA, 18042*

Certificate(s) of Occupancy

Type: *I-2* Date: Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *66* Waking Staff: *50*

Inspection

Type: *Partial* BHA Docket #: Notice: *Unannounced*
 Reason: *Incident*

Inspection Dates and Department Representative

04/30/2019 - On-Site: Kristin DeVries, Ryan Novak
05/10/2019 - Off-Site: Kristin DeVries

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *75* Residents Served: *50*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *50*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *16* Have Physical Disability: *1*

ABINGTON MANOR AT MORGAN HILL

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15c - Supervision

Regulations

2600.

15.c. The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

Description of Violation

On 4-1-2019, an allegation of abuse was made against Staff person A, Staff person B, and Staff person C. A plan of supervision was approved by the Department on 4-2-19 for these staff to continue working. Through staff interviews, it was determined that the approved plan of supervision was not being followed, as Staff person A and Staff person B were allowed to continue to provide care to other residents without another staff person present at all times.

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.)

It is always our goal as a facility to always maintain compliance with DHS regulations. THE Executive Director and DRC both met with staff persons A, B, and C after speaking with the DHS department supervisor advising us on what to do with our staff so they could continue working. When we sat with Staff persons A, B, and C we advised them that they were not to work alone until this allegation was resolved. It was entrusted in them to abide by our wishes that this be done until further notice. Since this was not followed as asked My DRC and Executive Director have implemented shift assignment sheets so there's no question on who is assigned to certain floors and tasks and residents and any special instructions can be added to these assignment sheets. This process is now implemented on each shift and made up by the DRC with appropriate assignments, in order for staff to know what they will be doing and who they will be working with for each shift.

*Ongoing:

If any future allegations of abuse occur, the home will immediately take the following steps:

- 1. Suspend the staff person or persons involved; 2. Report the alleged abuse to the Department; 3. Report the alleged abuse to the local Area Agency on Aging; 4. Report the alleged abuse to the resident's designated person, if any.

Legal Entity Representative *Diane Dellocano, Executive Director*

Signature *Diane Dellocano, E. D.*

Printed Name and Title *Diane Dellocano, E. D.*

Date *6/21/19*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of *7-2-19* (Date) Plan of correction implementation status as of *7-2-19* (Date)

The above plan of correction was approved by *MM* (Initials) Fully Implemented Partially Implemented - Adequate Progress Partially Implemented - Inadequate Progress Not Implemented

ABINGTON MANOR AT MORGAN HILL

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65g - Annual Training Content

Regulations

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

Description of Violation

Staff person A and Staff person B did not receive annual training in 4. The Older Adult Protective Services Act (35 P.S. § 10225.101—10225.5102) in training year 2018.

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.)

OUR goal as a facility is to always maintain compliance with DHS regulations. The Executive Director personally reviewed The Older Adult Protective Services Act with staff persons A and B on 6/21/19. All staff are required to attend annual trainings provided by the facility. The Executive Director will be tracking the trainings, and holding the staff accountable to ensure that all staff have the proper trainings completed annually.

Legal Entity Representative

Diane Dellocono, Executive Director
Signature

Diane Dellocono, Executive Director
Printed Name and Title
Date
6/21/19

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04/30/2019

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ABINGTON MANOR AT MORGAN HILL

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227d - Support Plan Medical/Dental

Regulations

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. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Through staff interviews, it was determined that Resident #1 required at least 3 staff to transfer/reposition him while in bed in order for staff to perform direct care services. Resident #1's RASP, dated 1-9-2019, does not identify this need and the home's plan to meet this need.

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.)

It is the goal of our facility to always maintain compliance with DHS regulations. The Executive Director or the DRC will update the RASP on any of our residents with a significant change within the designated 5 day time frame allowed by DHS.
CORRECTED
The DRC will review progress notes in our electronic charting system daily, and the shift to shift report as well as our 24 hour report sheet to ensure that the needed changes are made to the individuals RASP in a timely manner

Legal Entity Representative

Diane Dellocono, Executive Director
Signature

Diane Dellocono, Executive Director
Printed Name and Title
Date 6/21/19

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04/30/2019

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