



Sent via e-mail azuratt@prov-place.com
MAILING DATE: February 6, 2020

Ms. Anna Zuratt
Executive Director
Providence Place of Pine Grove Associates
1528 Sand Hill Road
Hummelstown, Pennsylvania 17036

RE: Providence Place of Pine Grove
24 Hikes Hollow Road
Pine Grove, Pennsylvania 17963
License #: 225500

Dear Ms. Zuratt:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on November 18, 2019 and December 19, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "M. Moskalczyk".

Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: PROVIDENCE PLACE OF PINE GROVE

License Number: 22550

Address: 24 HIKES HOLLOW ROAD,, PINE GROVE, PA 17963

County: SCHUYLKILL

Region: NORTHEAST

Administrator

Name: Anna Zuratt

Phone: 5703454999

Email: azuratt@prov-place.com

Legal Entity

Name: PROVIDENCE PLACE OF PINE GROVE ASSOCIATES

Address: 1528 SAND HILL ROAD, HUMMELSTOWN, PA, 17036

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 79

Waking Staff: 59

Inspection

Type: Partial

BHA Docket #:

Notice: Unannounced

Reason: Incident

Inspection Dates and Department Representative

11/18/2019 - On-Site: Amy Deluca

12/19/2019 - Off-Site: Amy Deluca

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 93

Residents Served: 65

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: 65

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 14

Have Physical Disability: 0

42b - Abuse

Regulations

2600.

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

Description of Violation

On 11/11/2019 resident #1 pushed the wheelchair of resident #2 into her bedroom and kissed the resident on her mouth.

On 11/30/19 and again on 12/1/19 resident #1 touched the right breast of resident #3.

Both resident #2 and resident #3 indicated that resident #1's advances were unwanted.

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.)

- Resident #1 moved to opposite hallway within 48^{hrs} of incident. Moved from west wing where resident #2 had also resided to east wing. All staff made aware to monitor behaviors & whereabouts of each resident. Act 13 completed PCP's and family notified of each resident. ED and DOW had individual conversation with resident #1 noting behavior is not acceptable in our community. Staff to assist resident #2 with locking door if needed
- 12/2/19 incident - Families and PCP's notified. Act 13 completed. ED and DOW had individual conversation with resident #1 noting behavior is unacceptable & despite recent conversations, this will result in notice to move out of facility. Notice given to resident & family. Senior Services made aware. Assisted family with placement. Hourly checks on resident #1 in place. Staff made aware to monitor behaviors and whereabouts. 2 hour checks in place for resident #4 (noted pg 3) as well

Legal Entity Representative

Anna Zuratt
Signature

Anna Zuratt Executive Director 1/20/2020
Printed Name and Title Date

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

The above plan of correction is approved as of 1-31-2020
(Date)

Plan of correction implementation status as of 1-31-2020
(Date)

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

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

due to resident #1 seen talking to resident #4 on a few occasions.

12/21/19 Resident #1 placed on 30 minute checks around the clock.

12/27/19 Resident #1 placed on 15 minute checks around the clock

Resident [REDACTED] placed on 30 minute checks as well
Reached out to [REDACTED] family for 24^{hr} private duty until
discharged, financially couldn't do. ED reached out to
numerous agencies to get private duty & providence place
will pay for. Able to obtain & secure care 12/30/19 from
Comfort Keepers Agency.

1/1/2020 - Resident #1 discharged with daughter to Heritage
Mills, Tower City, PA

12/30/2020 - Per conversation with Amy DeLuca on 12/27/19, asked if
there was anything she would recommend to put in place
due to notification of violation. She stated staff training

All staff re-trained on resident to resident situations if
staff notices any inappropriate contact. Identify - report to
supervisor to investigate - and that ED/DOW will help &
report as necessary.

1/6/2020 Staff again retrained on resident to resident reporting
at ED meeting.

1-31-2020

MM