pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: tchapla@paramountsl.net

MAILING DATE: January 31, 2020

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 Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 9, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Janine Wenzig
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

RECEIVED
JANUARY 7 2020
WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report

Facility Information

Name: *PARAMOUNT SENIOR LIVING AT BETHEL PARK* License Number: *44088*
Address: *5785 BAPTIST ROAD,, BETHEL PARK, PA 15102*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: *Anthony Chapla* Phone: *4128333500* Email: *tchapla@paramountsl.net*

Legal Entity

Name: *PARAMOUNT SENIOR LIVING AT BETHEL PARK LLC*
Address: *5785 BAPTIST ROAD, BETHEL PARK, PA, 15102*

Certificate(s) of Occupancy

Type: *I-1* Date: Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *156* Waking Staff: *117*

Inspection

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

Inspection Dates and Department Representative

12/09/2019 - On-Site: Josh Hoover

12/09/2019 - Off-Site: Josh Hoover

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *125* Residents Served: *106*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Care* Capacity: *28* Residents Served: *20*

Hospice

Current Residents: *NA*

Number of Residents Who:

Receive Supplemental Security Income: *0*
Diagnosed with Mental Illness: *0*
Have Mobility Need: *50*
Are 60 Years of Age or Older: *106*
Diagnosed with Intellectual Disability: *0*
Have Physical Disability: *1*

1/6/20

15a - Resident Abuse Report

Regulations

2600.

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

Description of Violation

On 12/2/2019, at approximately 8:30a.m., a private duty aide for resident #1 informed staff person A, the home's administrator, that she witnessed staff person B physically and verbally abuse resident #1. This abuse allegation was not reported to the local Area Agency on Aging until approximately 1:15p.m.

Repeat Violation 2/15/2019

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 4

Legal Entity Representative

Signature

Anthony R. CHAPLA
Executive Director
Printed Name and Title

1/6/2020
Date

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

The above plan of correction is approved as of 1/27/2020 (Date)

The above plan of correction was approved by (Initials)

Plan of correction implementation status as of 1/27/2020 (Date)

[X] Implemented
[ ] Not Implemented

Plan of Correction

for

Paramount Senior Living at Bethel Park

Attachment #1

Regulation 2600.15.a

1. Upon discovery of the incident on December 2, 2019, an investigation was completed that included interviews with all that were involved. The accused was placed in suspension (sent home) and the incident was reported to both AAA and DHS. Employee was terminated at the conclusion of the investigation.
2. Complete education of all employees by 1/24/20 on regulation 2600.15.a and the importance of immediately reporting all suspected abuse (Documentation will be kept).
3. Repeat the above mentioned education each month for the next 3 months (February March and April) to all nursing staff and resident care aid staff (Documentation will be kept).
4. Executive Director will interview 15 residents per month for the next 3 months (January, February and March) to inquire about any possible abuse issues (Documentation will be kept).
5. Center will work with the Area Agency on Aging to have the Ombudsman office complete an educational in-service on Resident Rights for all staff by February 7, 2020. Documentation will be kept.

1/27/2020

15b - Supervisor Plan

Regulations

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

On 12/2/2019, at approximately 8:30a.m., a private duty aide for resident #1 informed staff person A, the home's administrator, that she witnessed staff person B physically and verbally abuse resident #1. Staff person B was not immediately suspended or placed on a plan of supervision. Staff person B provided unsupervised direct care to residents of the home until approximately 1:00p.m. that day.

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

Legal Entity Representative

Signature	Printed Name and Title	Date
	Anthony R. Chapla Executive Director	1/6/20

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

The above plan of correction is approved as of 1/13/20 (Date)

The above plan of correction was approved by (Initials)

Plan of correction implementation status as of 1/27/2020 (Date)

- [X] Implemented
- [ ] Not Implemented

Plan of Correction

for

Paramount Senior Living at Bethel Park

Attachment #2

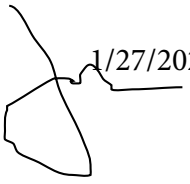
Regulation 2600.15.b

1. Upon discovery of the incident on December 2, 2019, an investigation was completed that included interviews with all that were involved. The accused was placed in suspension (sent home) and the incident was reported to both AAA and DHS. The employee was terminated at the conclusion of the investigation.

2. Complete education of all employees by 1/24/20 on regulation 2600.15.b and the importance of immediately suspending any employee involved with a suspected abuse case (Documentation will be kept).

3. Repeat the above mentioned education each month for the next 3 months (February March and April) to nursing staff and resident care aid staff (Documentation will be kept).

4. Executive Director will interview 15 residents per month for the next 3 months (January, February and March) to inquire about any possible abuse issues (Documentation will be kept).



1/27/2020

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

Resident #1 resides in the home's Secured Dementia Care Unit and receives hospice services. On 12/2/2019, at approximately 8:00a.m., staff persons B and C were dressing resident #1 while the resident was lying in bed. The resident struck staff person B in the abdomen then staff person B forcefully grabbed the resident's forearms and yelled "That's the second time you hit me!" and "Don't you dare ever do that to me again!" Resident #1 cried out and said to staff person B, "You're hurting me!" The resident suffered bruising on her right forearm, consistent with being grabbed, and over the following week, her right forearm swelled in an area measuring approximately 5 inches by 3 inches and a skin tear developed in the location of the original bruising.

Repeat Violation: 2/15/2019

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 #3

See Page 4A of 4

Legal Entity Representative

Signature

Anthony R. Chapla
Executive Director
Printed Name and Title

1/6/20
Date

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The above plan of correction is approved as of 1/27/2020 (Date)

Plan of correction implementation status as of 1/27/2020 (Date)

X Implemented
☐ Not Implemented

The above plan of correction was approved by (Initials)

Plan of Correction

for

Paramount Senior Living at Bethel Park

Attachment #3

Regulation 2600.42.b.

1. Upon discovery of the incident on December 2, 2019, an investigation was completed that included interviews with all that were involved. The accused was placed in suspension (sent home) and the incident was reported to both AAA and DHS. The employee was terminated at the conclusion of the investigation.

2. Complete education of all employees by 1/24/20 on regulation 2600.42.b. and all resident rights in personal care home. (Documentation will be kept).

3. Repeat the above mentioned education each month for the next 3 months (February March and April) to all nursing staff and resident care aid staff (Documentation will be kept).

4. Executive Director will interview 15 residents per month for the next 3 months (January, February and March) to inquire about any possible abuse issues (Documentation will be kept).

5. Center will work with the Area Agency on Aging to have the Ombudsman office complete an educational in-service on Resident Rights for all staff by February 7, 2020. Documentation will be kept.

1/27/2020

1/6/20