



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: jmoses@countrymeadows.com
cfroats@countrymeadows.com

MAILING DATE: May 8, 2020

Ms. Diana Ponterio
Sr. Vice President of Operations
Regulatory Compliance
Country Meadows Associates
830 Cherry Drive
Hershey, Pennsylvania 17033

RE: Country Meadows of South Hills I
3560 Washington Pike
Bridgeville, Pennsylvania 15017
Certificate #: 430660

Dear Ms. Ponterio:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on April 21, 2020, 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 "L. Mazza".

Larry Mazza
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

5/1/2020

Violation Report

Western Region Field Office
Bureau of Human Services Licensing

Facility Information

Name: *COUNTRY MEADOWS OF SOUTH HILLS I*
 Address: *3560 WASHINGTON PIKE, BRIDGEVILLE, PA 15017*
 County: *ALLEGHENY* Region: *WESTERN*

License Number: *43066*

Administrator

Name: *John Moses* Phone: *4122572855* Email: *jmoses@countrymeadows.com*

Legal Entity

Name: *COUNTRY MEADOWS ASSOCIATES*
 Address: *830 CHERRY DRIVE, HERSHEY, PA, 17033*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *98* Waking Staff: *74*

Inspection

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

Inspection Dates and Department Representative

04/21/2020 - On-Site: Amy Duncan

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *100* Residents Served: *59*

Secured Dementia Care Unit

In Home: *Yes* Area: *Connections* Capacity: *50* Residents Served: *34*

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *59*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *39* 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 4/10/20 at approximately 7:50 am, resident #1, who resides in the home's secured dementia care unit, was observed by direct care staff person A to be in an agitated state, banging her walker from side to side on the doorframe of her bedroom. Direct care staff person A asked the resident what was wrong, and resident #1 stated, "That girl hurt my arm." Direct care staff person B was present in the bedroom and had been providing morning hygiene care. An assessment by the home's licensed practical nurse noted several bruises and swelling on the resident's right arm as well as 2 hematomas: One measuring 3.25cm x 2cm on the anterior of the forearm, and another measuring 3cm x 3cm on the posterior of the forearm.

REPEAT VIOLATION: 7/12/2019

Plan of Correction (POC)

As soon as Staff person A heard the resident say that Staff person B had hurt her arm she immediately ensured the residents safety and removed the resident from the area and had the nurse assess the resident. She then immediately reported the incident to the Executive Director who removed Staff person B from her shift, interviewed her and suspended her from work pending investigation. The Executive Director notified the Campus Executive Director and the Sr. Vice President. A full investigation was completed and Staff person B was terminated from employment. All reports were completed on 4/10/20 per regulation. All staff persons have been re-educated on resident abuse. (see attached sign in sheets). Staff are trained annually and frequently on how to approach residents who are resistant to care. This training in validation and care of residents with dementia will be completed again for direct caregivers by May 31st. Sign in sheets will be forwarded once it is completed. Ongoing education will be provided to the staff and resident safety will be monitored by the Executive Director, Assistant Director of Nursing and our LPN's. Per discussion with Sr. VP of operations on 5/5/20: Beginning 5/11/20, a designated staff person will interview at least 4 residents monthly to ensure residents are free from abuse and neglect. 5/5/2020

Legal Entity Representative

Diana Ponterio

Diana Ponterio, Sr. VP of Operations/Reg. Compliance 05/01/2020

Signature

Printed Name and Title

Date

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

The above plan of correction is approved as of 5/5/2020
(Date)

Plan of correction implementation status as of 5/5/2020
(Date)

The above plan of correction was approved by *[Signature]*
(Initials)

- Implemented
- Not Implemented