

Department of Human Services  
Bureau of Human Service Licensing

May 17, 2022

[REDACTED]  
COMMUNITY SERVICES GROUP INC  
[REDACTED]  
[REDACTED]

RE: COMMUNITY SERVICES GROUP  
532 W. SAYLOR STREET  
ATLAS, PA, 17851  
LICENSE/COC#: 20813

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/11/2021, 06/10/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing  
**LICENSING INSPECTION SUMMARY**

**Facility Information**

Name: *COMMUNITY SERVICES GROUP* License #: *20813* License Expiration: *07/18/2022*  
Address: *532 W. SAYLOR STREET, ATLAS, PA 17851*  
County: *NORTHUMBERLAND* Region: *NORTHEAST*

**Administrator**

Name: [REDACTED] Phone: *570-339-2360* Email: [REDACTED]

**Legal Entity**

Name: *COMMUNITY SERVICES GROUP INC*  
Address: *P.O. BOX 597, 320 HIGHLAND DRIVE, MOUNTVILLE, PA, 17554*  
Phone: *570-339-2360* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *08/21/2001* Issued By: *Labor & Industry*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *18* Waking Staff: *14*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *11/04/2021*

**Inspection Dates and Department Representative**

06/11/2021 - On-Site: [REDACTED]  
06/10/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *20* Residents Served: *18*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *18* Are 60 Years of Age or Older: *12*  
Diagnosed with Mental Illness: *18* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *0*

## Inspections / Reviews

06/11/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *12/20/2021*

02/08/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *02/15/2022*

03/24/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *03/31/2022*

05/06/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *05/16/2022*

05/17/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

In an interview with resident # 1 and confirmations with staff, resident # 1 was told by [redacted] "A", that resident # 1's chest pains "There better be something wrong with you this time" Although resident # 1's complaint of chest pain did not result in an actual cardiac emergency, [redacted] "A" did not respond to resident # 1 in a caring, professional, and respectful manner. [redacted] "A" had consistently spoke to both residents and staff disrespectfully - creating an unhealthy environment for residents who live and staff who work at the home.

Plan of Correction

Do Not Accept

[redacted] A no longer works for Community Services group. Moving forward all staff will treat residents with dignity and respect. This will be model by the new leadership team at the home and this expectation will be reviewed with all staff at a team meeting.

Completion Date: 01/15/2022

Update: 02/08/2022

What will the model of resident dignity and respect be? When will it be implemented? Will there be both a staff training and a resident council meeting?

AG, 2-8-22

Plan of Correction

Do Not Accept

If a resident has a complaint the staff member will ask the resident relevant questions, offer suggestions, solutions and options. The Program Director will document the expectations in a "How we behave with our residents" document and review this document with all staff to be implemented immediately.

Completion Date: 04/01/2022

Update: 03/24/2022

Does this document match the Resident's Rights as referenced in the 2600 Regulations? If so this is acceptable. If not it will have to be adjusted to match the residents rights as found in the 2600 regulations.

Plan of Correction

Accept

If a resident has a complaint the staff member will ask the resident relevant questions, offer suggestions, solutions and options. The Program Director will document the expectations in a "How we behave with our residents" document and review this document with all staff to be implemented immediately. Resident Rights were reviewed with all staff in February 2022. This training is reviewed annually. In addition, resident rights are reviewed with all new staff during the first 40 hours of employment.

Completion Date: 04/18/2022

Update: 05/06/2022

The Home will attach the "How WE Behave With Our Residents" handouts and the staff sign in sheet for the training from 2-22 in the Step 2 verifications in the Portal.

AG, 5-6-22

Document Submission

Implemented

The Home will attach the "How WE Behave With Our Residents" handouts and the staff sign in sheet for the training from 2-22 in the Step 2 verifications in the Portal.

*42c - Treatment of Residents (continued)*

AG, 5-6-22