

Department of Human Services  
Bureau of Human Service Licensing

June 23, 2022

[REDACTED]  
RURAL LIVING INC  
[REDACTED]

RE: WYNWOOD HOUSE AT GREENHILLS  
301 FARMSTEAD LANE  
STATE COLLEGE, PA, 16803  
LICENSE/COC#: 24323

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/16/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Michele Moskalczyk  
Human Services Licensing Supervisor

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: WYNWOOD HOUSE AT GREENHILLS License #: 24323 License Expiration: 12/13/2022  
Address: 301 FARMSTEAD LANE, STATE COLLEGE, PA 16803  
County: CENTRE Region: NORTHEAST

**Administrator**

Name: [REDACTED] Phone: 8142349898 Email: [REDACTED]

**Legal Entity**

Name: RURAL LIVING INC  
Address: 220 REGENT COURT, SUITE E-1, STATE COLLEGE, PA, 16801  
Phone: 8142349898 Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 04/03/1997 Issued By: L&I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 35 Waking Staff: 26

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
Reason: Complaint, Incident Exit Conference Date: 03/16/2022

**Inspection Dates and Department Representative**

03/16/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: 47 Residents Served: 34

**Secured Dementia Care Unit**

In Home: Yes Area: n/a Capacity: 15 Residents Served: 0

**Hospice**

Current Residents: 2

**Number of Residents Who:**

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 34  
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 1  
Have Mobility Need: 1 Have Physical Disability: 0

**Inspections / Reviews**

03/16/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/12/2022

Inspections / Reviews *(continued)*

06/12/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *06/20/2022*

06/23/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 15a - Resident Abuse Report

## 1. Requirements

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 02/28/22 resident #1 reported to the home's administrator that on 02/27/22 staff person A was observed yelling at resident #2 to get up and trying to pull resident #2 up by the arm. The home did not report the incident to the area agency on aging as required. The incident was also confirmed by a separate anonymous complaint made to the department.

## Plan of Correction

Accept

The Office of Aging was notified of complaint on 3/16/22. Spoke to a [REDACTED] and explained the complaint. Please see attachment titled [REDACTED] Incident Report. All complaints of suspected abuse will be reported to the area agency on aging as required. The administrator will oversee to maintain ongoing compliance.

This POC is complete

Completion Date: 03/16/2022

## Document Submission

Implemented

The Office of Aging was notified of complaint on 3/16/22. Spoke to a [REDACTED] and explained the complaint. Please see attachment titled GH-[REDACTED] Incident Report. All complaints of suspected abuse will be reported to the area agency on aging as required. The administrator will oversee to maintain ongoing compliance.

This POC is complete

## 16c - Written Incident Report

## 1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

## Description of Violation

On 02/28/22 resident #1 reported to the home's administrator that on 02/27/22 staff person A was observed yelling at resident #2 to get up and trying to pull resident #2 up by the arm. The home did not report the incident to the Department's regional office as required. The incident was also confirmed by a separate anonymous complaint made to the department.

## Plan of Correction

Accept

An incident report was immediately sent into the Department's regional office. All reports will be sent within 24hrs of the occurrence. The Administrator will oversee all reportable incidents to maintain compliance. Please see attachment titled GH-Campbell incident report.

This POC is complete.

Completion Date: 03/16/2022

## Document Submission

Implemented

An incident report was immediately sent into the Department's regional office. All reports will be sent within 24hrs

16c - Written Incident Report (continued)

of the occurrence. The Administrator will oversee all reportable incidents to maintain compliance. Please see attachment titled GH- incident report.

This POC is complete.

42c - Treatment of Residents

1. Requirements

2600.  
42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident #2 was mistreated by staff person A on 02/27/22 when staff person A tried to get resident #2 up out of a chair by raising voice at the resident and by pulling the resident by the arm.

Plan of Correction

Accept

All staff was given a training on resident rights. Staff A was terminated. Please see attachment titled GH-Resident Right Training. Administrator will continue to monitor.

This POC is complete.

Completion Date: 03/16/2022

Update: 06/12/2022

Please send proof of staff training.

Document Submission

Implemented

All staff was given a training on resident rights (copy of resident rights was given for all to read). Staff A was terminated. Please see attachment titled GH-Resident Right Training. Administrator will continue to monitor.

This POC is complete.