

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

May 25, 2023

[REDACTED], CEO
COUNTRY MANOR PCH LP
111 ALTMAYER DRIVE
KITTANNING, PA, 16201

RE: COUNTRY MANOR
111 ALTMAYER DRIVE
KITTANNING, PA, 16201
LICENSE/COC#: 44629

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/01/2023, 03/01/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: COUNTRY MANOR License #: 44629 License Expiration: 03/21/2024
 Address: 111 ALTMAYER DRIVE, KITTANNING, PA 16201
 County: ARMSTRONG Region: WESTERN

Administrator

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

Legal Entity

Name: COUNTRY MANOR PCH LP
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/20/1996 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 39 Waking Staff: 29

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 03/01/2023

Inspection Dates and Department Representative

03/01/2023 - On-Site: [REDACTED]
 03/01/2023 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 50 Residents Served: 35

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 3

Number of Residents Who:
 Receive Supplemental Security Income: 12 Are 60 Years of Age or Older: 29
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 1
 Have Mobility Need: 4 Have Physical Disability: 1

Inspections / Reviews

03/01/2023 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/07/2023

04/19/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 05/23/2023
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 05/03/2023

Inspections / Reviews *(continued)*

05/22/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/23/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/26/2023

05/25/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/23/2023

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 [redacted], at approximately [redacted], staff person A, [redacted], was made aware of the allegation that on [redacted] staff persons A and B grabbed resident #1 by the throat and threw the resident up against the wall in the dining area. However, this allegation of abuse was not reported to the local Area Agency on Aging until [redacted]

Plan of Correction

Accept [redacted] - 04/19/2023)

Once staff person A, ([redacted]) was informed on [redacted] that there was an allegation of abuse against [redacted] along with Staff person B against Resident #1, it was immediately reported to DHS and Protective Services by the Administrator. Same day a plan of supervision was made between protective services and Staff person A & B. A training on abuse and neglect will be scheduled with Protective services to take place by 4-17-2023

This violation is being disputed due to no abuse taking place. This was fabricated by a disgruntled former Staff person. The Administrator (who was being accused) did not commit any abuse, therefore would not report something that did not happen. After a full investigation, the lead Inspector informed the Executive Director on 3-29-2023 that the alleged abuse was unsubstantiated. The Administrator was not at fault for not reporting something that was obviously fabricated. She knew nothing of an accusation until DHS came to the Facility and told her what the allegation was.

Licensee's Proposed Overall Completion Date: 04/17/2023

Implemented [redacted] - 05/25/2023)

15b Supervisor Plan

2. Requirements

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 [redacted], at approximately [redacted] am., staff person A, [redacted], was made aware of the allegation that on [redacted] staff persons A and B grabbed resident #1 by the throat and threw the resident up against the wall in the dining area. The home did not immediately develop and implement a plan of supervision or suspend the staff persons involved in the alleged incident.

Plan of Correction

Accept [redacted] - 04/19/2023)

Once staff person A, ([redacted]) was informed on [redacted] that there was an allegation of abuse against [redacted] along with Staff person B against Resident #1, it was immediately reported to DHS and Protective Services by the Administrator. Same day a plan of supervision was made between protective services and Staff person A & B. A training on abuse and neglect will be scheduled with Protective services to take place by 4-17-2023

This violation is being disputed due to no abuse taking place. This was fabricated by a disgruntled former Staff person. The Administrator (who was being accused) did not commit any abuse, therefore would not report

15b Supervisor Plan (continued)

something that did not happen. [REDACTED] would not start a plan of supervision or dismissal on [REDACTED] as it didn't happen. After a full investigation, the lead Inspector informed the Executive Director on 3 29 2023 that the alleged abuse was unsubstantiated. The Administrator was not at fault for not reporting something that was obviously fabricated. She knew nothing of an accusation until DHS came to the Facility and told her what the allegation was.

Licensee's Proposed Overall Completion Date: 04/17/2023

Implemented [REDACTED] - 05/25/2023)

16c - Written Incident Report

3. 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 [REDACTED], at approximately [REDACTED], staff person A, [REDACTED], was made aware of the allegation that on [REDACTED] staff persons A and B grabbed resident #1 by the throat and threw the resident up against the wall in the dining area. The home did not report this incident to the Department until [REDACTED].

Plan of Correction

Accept [REDACTED] - 04/19/2023)

Once staff person A, [REDACTED] was informed on [REDACTED] that there was an allegation of abuse against [REDACTED] along with Staff person B against Resident #1, it was immediately reported to DHS and Protective Services by the Administrator. Same day a plan of supervision was made between protective services and Staff person A & B. A training on abuse and neglect will be scheduled with Protective services to take place by 4 17 2023

This violation is being disputed due to no abuse taking place. This was fabricated by a disgruntled former Staff person. The Administrator (who was being accused) did not commit any abuse, therefore would not report something that did not happen. After a full investigation, the lead Inspector informed the Executive Director on 3 29 2023 that the alleged abuse was unsubstantiated. The Administrator was not at fault for not reporting something that was obviously fabricated. She knew nothing of an accusation until DHS came to the Facility and told her what the allegation was.

Licensee's Proposed Overall Completion Date: 04/17/2023

Implemented [REDACTED] - 05/25/2023)