

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

April 18, 2023

[REDACTED]
JEFFCO HEALTH SERVICES INC
417 RT. 28
BROOKVILLE, PA, 15825

RE: PENN HIGHLANDS JEFFERSON
MANOR P. C.
417 RT. 28
BROOKVILLE, PA, 15825
LICENSE/COC#: 40624

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/16/2023 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: PENN HIGHLANDS JEFFERSON MANOR P C License #: 40624 License Expiration: 11/24/2023
 Address: 417 RT. 28, BROOKVILLE, PA 15825
 County: JEFFERSON Region: WESTERN

Administrator

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

Legal Entity

Name: JEFFCO HEALTH SERVICES INC
 Address: 417 RT. 28, BROOKVILLE, PA, 15825
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP Date: 02/09/1994 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 48 Waking Staff: 36

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 03/16/2023

Inspection Dates and Department Representative

03/16/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 48 Residents Served: 31

Secured Dementia Care Unit
 In Home: Yes Area: second floor Capacity: 24 Residents Served: 17

Hospice
 Current Residents: 0

Number of Residents Who:
 Receive Supplemental Security Income: 6 Are 60 Years of Age or Older: 29
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 17 Have Physical Disability: 0

Inspections / Reviews

03/16/2023 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/01/2023

03/31/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 04/14/2023
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 04/14/2023

Inspections / Reviews *(continued)*

04/18/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/14/2023

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] 23, at approximately [REDACTED] am., staff person A screamed at resident #1 "put these [REDACTED] g pants on" while attempting to help resident #1 change clothes in the resident's bedroom. The resident was refusing to wear what staff person A was attempting to dress him/her in. Staff person A then responded, "wear what you want", as staff person A walked away and left the resident's bedroom. However, this allegation of abuse was not reported to the local Area Agency on Aging until [REDACTED] 23.

Plan of Correction

Accept [REDACTED] 03/31/2023)

Upon receipt of allegation on [REDACTED] 23, facility immediately initiated an investigation. Resident A was assessed by a Registered Nurse, and the resident's physician and responsible party were notified. Staff person A was also immediately interviewed on [REDACTED] /23 by the Nursing Home Administrator. Resident A did not recall the events of [REDACTED] /23 with staff person A. No other residents were identified to be affected. The staff member that observed this event received immediate education from the Nursing Home Administrator on [REDACTED] /23 regarding the staff member's obligation to report abuse allegations immediately to administration.

Staff person A was immediately suspended following interview on [REDACTED] /23, and had no further contact with Resident A or any other resident. Staff person A was suspended from work from [REDACTED] /23 until the time of termination of employment on [REDACTED] /23.

On [REDACTED] /23, facility staff received education from the Nursing Home Administrator regarding their designation as mandated reporters and their obligation to report allegations of abuse immediately to facility administration. Education was also provided on the facility abuse prevention and reporting policy, and expectation that staff treat residents with respect and preserve resident's dignity. Staff were also educated regarding the care of residents displaying behaviors or agitation.

The facility Abuse Prevention and Reporting policy will be posted on the employee bulletin board for staff reference. Personal Care Home Administrator will complete random interviews of facility staff weekly for 2 months to assure that staff understand abuse reporting policy and requirements.

Licensee's Proposed Overall Completion Date: 04/07/2023

Implemented ([REDACTED] - 04/18/2023)

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] /23, at approximately [REDACTED] am., staff person A screamed at resident #1 "put these [REDACTED] g pants on" while attempting to help resident #1 change clothes in the resident's bedroom. The resident was refusing to wear what

15b - Supervisor Plan (continued)

staff person A was attempting to dress him/her in. Staff person A then responded, "wear what you want", as staff person A walked away and left the resident's bedroom.

The home did not immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident until [redacted]/23.

Plan of Correction

Accept ([redacted] 03/31/2023)

Upon receipt of allegation on 3/6/23, facility immediately initiated an investigation. No other residents were identified to be affected.

Staff person A was immediately interviewed on [redacted]/23, and suspended from working by the Nursing Home Administrator; staff person A had no further contact with facility residents until the time of termination of employment on [redacted]/23.

Facility Administration will immediately interview and suspend staff members, pending investigation, for allegations of abuse.

On [redacted] 23, facility staff received education from the Nursing Home Administrator regarding their designation as mandated reporters and their obligation to report allegations of abuse immediately to facility administration. Education was also provided on the facility abuse prevention and reporting policy, and expectation that staff treat residents with respect and preserve resident's dignity. Staff were also educated regarding the care of residents displaying behaviors or agitation. [redacted] 3/31/23

Licensee's Proposed Overall Completion Date: 04/07/2023

Implemented [redacted] - 04/18/2023)

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]/23, at approximately [redacted] am., staff person A screamed at resident #1 "put these [redacted]g pants on" while attempting to help resident #1 change clothes in the resident's bedroom. The resident was refusing to wear what staff person A was attempting to dress him/her in. Staff person A then responded, "wear what you want", as staff person A walked away and left the resident's bedroom.

The home did not report this incident to the Department until [redacted] 23.

Plan of Correction

Accept ([redacted] 03/31/2023)

Upon receipt of allegation on [redacted] 23, facility immediately initiated an investigation. No other residents were identified to be affected.

The Nursing Home Administrator reported this allegation to the Department on [redacted]/23 following receipt of the allegation.

Facility administration provided education to facility staff on [redacted] 23 regarding staff requirement to report allegations of abuse immediately.

Facility staff and administration will complete reporting of abuse allegations within required regulatory timelines

16c - Written Incident Report (continued)

going forward following this event.

Licensee's Proposed Overall Completion Date: 04/07/2023

Implemented (████) - 04/18/2023)

42b Abuse

4. Requirements

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 █████/23, at approximately █████ am., staff person A screamed at resident #1 "put these █████g pants on" while attempting to help resident #1 change clothes in the resident's bedroom. The resident was refusing to wear what staff person A was attempting to dress him/her in. Staff person A then responded, "wear what you want", as staff person A walked away and left the resident's bedroom.

Plan of Correction

Accept (████) 03/31/2023)

Upon receipt of allegation on █████/23, facility immediately initiated an investigation. Resident A was assessed by a Registered Nurse, and the resident's physician and responsible party were notified. Staff person A was also immediately interviewed on █████/23 by the Nursing Home Administrator. Resident A did not recall the events of █████/23 with staff person A. No other residents were identified to be affected. The staff member that observed this event received immediate education from the Nursing Home Administrator on █████/23 regarding the staff member's obligation to report abuse allegations immediately to administration.

Staff person A was immediately suspended following interview on █████/23, and had no further contact with Resident A or any other resident. Staff person A was suspended from work from █████/23 until the time of termination of employment on █████/23.

On █████/23, facility staff received education from the Nursing Home Administrator regarding their designation as mandated reporters and their obligation to report allegations of abuse immediately to facility administration. Education was also provided on the facility abuse prevention and reporting policy, and expectation that staff treat residents with respect and preserve resident's dignity. Staff were also educated regarding the care of residents displaying behaviors or agitation.

The facility Abuse Prevention and Reporting policy will be posted on the employee bulletin board for staff reference. Personal Care Home Administrator will complete random interviews of facility staff weekly for 2 months to assure that staff understand abuse reporting policy and requirements.

Licensee's Proposed Overall Completion Date: 04/07/2023

Implemented (████) 04/18/2023)