

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

October 20, 2023

[REDACTED], CEO  
2830 CAROL RD OPCO LLC  
2830 CAROL ROAD  
YORK, PA, 17402

RE: AMOROSO WELLNESS AT YORK  
2830 CAROL ROAD  
YORK, PA, 17402  
LICENSE/COC#: 33779

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/14/2023, 09/15/2023 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: AMOROSO WELLNESS AT YORK

License #: 33779

License Expiration: 06/03/2024

Address: 2830 CAROL ROAD, YORK, PA 17402

County: YORK

Region: CENTRAL

## Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

## Legal Entity

Name: 2830 CAROL RD OPCO LLC

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

## Certificate(s) of Occupancy

Type: I-1

Date: 02/07/2022

Issued By: Springettsbury Township

## Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 117

Waking Staff: 88

## Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 09/14/2023

## Inspection Dates and Department Representative

09/14/2023 - On-Site: [REDACTED]

09/15/2023 - Off-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 125

Residents Served: 85

## Secured Dementia Care Unit

In Home: Yes

Area: Aria

Capacity: 20

Residents Served: 19

## Hospice

Current Residents: 8

## Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 85

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 32

Have Physical Disability: 2

## Inspections / Reviews

09/14/2023 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 09/29/2023

09/29/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 10/06/2023

Inspections / Reviews *(continued)*

10/12/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 10/19/2023

10/20/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 42b - Abuse

**1. 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 [REDACTED] at approximately [REDACTED], Resident 1 was found on the floor and Resident 2 was screaming to "shut up" repeatedly. According to statements provided by staff, Resident 1 appeared to be fearful of Resident 2.

**Plan of Correction****Accept** [REDACTED] - 10/12/2023)

The residents, #1 and #2, are husband and wife. Promptly after this incident they were moved to separate rooms. Resident #2 is in a room by [REDACTED]. Resident #2 was sent to York Hospital for evaluation and medication adjustment shortly after incident. By [REDACTED] the administrator or designee will provide a refresher on identifying and reporting abuse and neglect to nursing staff. Clinical meeting with the Executive Director and the Director of Wellness is held Monday through Friday, along with a Manager on Duty program for the weekend. The Director of Wellness will meet with the Memory Care Director and floor staff for any follow-up needed post clinical meeting. The Manager on Duty checks in with each department and each floor. This incident was reported to the department promptly and within the required timeframe. All concerns will be addressed in the monthly QAPI meetings, the next meeting is scheduled for 10/26/23.

Licensee's Proposed Overall Completion Date: 10/12/2023

**Implemented** [REDACTED] - 10/20/2023)

## 42x - Safeguard

**2. Requirements**

2600.

42.x. A resident has the right to a system to safeguard a resident's money and property.

**Description of Violation**

On [REDACTED], Resident 1 was sent to the hospital for treatment of an injury. Upon return to the home, the resident's rings were placed into a lockable nightstand in the resident's room by a staff person. On [REDACTED] it was discovered that the rings were missing and have not been found as of the time of the inspection on 9/14/23.

**Plan of Correction****Accept** [REDACTED] - 10/12/2023)

New policy implemented on 9/28/23 regarding items that potentially could have value if found/returned to community. If an item is found or returned to the community that could have value and the resident is unable to secure the item in their room (i.e., they reside in Memory Care and/or are confused), the family will be contacted to pick item up by the nurse/med tech responsible for the resident upon return to the community, immediately. The item will then be placed in the narcotic box and the ED/ DOW will be notified immediately. The nurse/med tech will document in the progress notes all actions taken. The item is "counted" every shift until the ED/DOW remove the item and places in the safe for the family to pick up (the next business day). The ED/DOW will call the family and set up a time to pick up the item. When the item is picked up, the ED or designee will sign and the POA will sign and date. The attachment shows the sheet to "count" and sign when the item is received. All nursing staff will be in-serviced by 10/5/23 on new procedure.

Licensee's Proposed Overall Completion Date: 10/06/2023

42x Safeguard (*continued*)

*Implemented* [REDACTED] - 10/20/2023)