

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

February 7, 2024

[REDACTED]  
TITUSVILLE OPS LLC  
[REDACTED]  
[REDACTED]

RE: SOUTHWOODS AL  
322 SOUTH MARTIN STREET  
TITUSVILLE, PA, 16354  
LICENSE/COC#: 45406

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/02/2023 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: *SOUTHWOODS AL* License #: *45406* License Expiration: *10/31/2024*  
 Address: *322 SOUTH MARTIN STREET, TITUSVILLE, PA 16354*  
 County: *CRAWFORD* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *TITUSVILLE OPS LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *02/24/1999* Issued By: *Department of labor*

**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: *11/02/2023*

**Inspection Dates and Department Representative**

*11/02/2023 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *52* Residents Served: *42*

**Special Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *0*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *42*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *6* Have Physical Disability: *0*

**Inspections / Reviews**

**11/02/2023 - Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/26/2023*

**12/06/2023 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *01/18/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/04/2024*

Inspections / Reviews *(continued)*

02/07/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/18/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 42c Dignity/Respect

## 1. Requirements

2800.

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

## Description of Violation

On [REDACTED], staff members A and B were attempting to transfer resident [REDACTED] into [REDACTED] bed. During which time staff member B inadvertently pushed on resident [REDACTED] injured left leg causing [REDACTED] pain and to subsequently yell at staff member B. Staff member B then yelled at resident [REDACTED] to lift [REDACTED] leg multiple times and in a very loud manner.

On [REDACTED], shortly after breakfast staff member B was transporting resident [REDACTED] from the resident dining area back to [REDACTED] room, resident room [REDACTED]. When the resident mailboxes were passed while in rout to resident room [REDACTED] resident [REDACTED] requested to stop and obtain [REDACTED] mail. Staff member B responding to resident [REDACTED] request by stating I don't have time for that now. Resident [REDACTED] requested [REDACTED] mail two more times during the transport at which point staff member B stated you want your mail, fine! Staff member B then turned resident [REDACTED] wheelchair in such a manner at to cause resident [REDACTED] to believe the wheelchair could tip over.

## Plan of Correction

Accept [REDACTED] - 12/06/2023)

This plan of correction is submitted as required under State law. The submission of this Plan of Correction does not constitute any admission of civil or criminal liability on the part of the named Community as to contents stated in this Statement of Deficiencies. Any changes to the Community's policies and procedures made because of its receipt of this Statement of Deficiencies are subsequent remedial measures as that concept is employed in Rule 407 of the Federal Rules of Evidence and any corresponding state rules of civil procedure and should be inadmissible in any proceeding on that basis. The Community submits this plan of correction with the intention that it be inadmissible by any third party in any civil or criminal action against the Community or any employee, agent, officer, director, attorney, or shareholder of the Community or affiliated companies.

Residence disputes the below cited violation but is without procedural option to appeal the violation.

55 Pa. Code § 2800.42.c. A resident shall be treated with dignity and respect.

Staff member A has not worked since [REDACTED]. Staff members will receive education at the time of return to work. The education will be completed by the Executive Director or designee. Training documentation will be maintained.

Staff member B, who has worked at the community since [REDACTED], received one on one education on treating residents with dignity and respect. The retraining was completed by the Executive Director on [REDACTED]. Training documentation will be maintained.

All staff will receive retraining on dignity and respect. The Executive Director or designee will schedule training with the local ombudsman to present the training. Training will be completed at the availability of the local ombudsman on [REDACTED] at [REDACTED]. Training documentation will be maintained.

New direct care team members will receive training in that all residents shall be treated with dignity and respect by the Executive Director or designee. Training documentation will be maintained.

The Care Team Manager or designee will meet with Resident [REDACTED] who has resided at community since [REDACTED], weekly. The meeting with the resident will include conversation regarding treatment of the resident by the team

42c Dignity/Respect (continued)

members. This meeting will occur for four weeks beginning the week of [REDACTED]. Additional weekly audits will be conducted until there are four weeks of consistent compliance with this regulation. Once four weeks of consecutive compliance is achieved the Care Team Manager or designee will monitor monthly until three months of consecutive compliance is demonstrated.

The Executive Director or designee will interview a sampling of 10% of the residents weekly. The meeting with the resident will include conversation regarding treatment of the resident by the team members. The sampling of residents will be conducted for four weeks beginning the week of [REDACTED]. Additional weekly interviews will be conducted until there are four weeks of consistent compliance with this regulation. Once four weeks of consecutive compliance are achieved the Executive Director or designee will monitor monthly until three months of consecutive compliance is demonstrated.

Licensee's Proposed Overall Completion Date: 12/29/2023

Implemented [REDACTED] - 02/07/2024)