

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

March 22, 2024

[REDACTED]
DUNCANSVILLE OPS LLC
[REDACTED]
[REDACTED]

RE: THE WINDS AT MATTERN
ORCHARD AL
590 NEWRY LANE
DUNCANSVILLE, PA, 16635
LICENSE/COC#: 33835

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/17/2024 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: *THE WINDS AT MATTERN ORCHARD AL* License #: 33835 License Expiration: 10/31/2024
 Address: 590 NEWRY LANE, DUNCANSVILLE, PA 16635
 County: BLAIR Region: CENTRAL

Administrator

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

Legal Entity

Name: DUNCANSVILLE OPS LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 08/01/2001 Issued By: Labor and Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 60 Waking Staff: 45

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 01/17/2024

Inspection Dates and Department Representative

01/17/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 70 Residents Served: 52
 Special Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 6
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 0
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 8 Have Physical Disability: 0

Inspections / Reviews

01/17/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/03/2024

02/21/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/20/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 02/28/2024

Inspections / Reviews (*continued*)

03/22/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/20/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b Abuse/Neglect

1. Requirements

2800.

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] staff member D was observed and recorded with a cellular phone using derogatory and profane language towards resident [redacted].

Plan of Correction

Accept [redacted] - 02/20/2024)

Staff Person D was immediately suspended upon notification of the allegation on [redacted]. An internal investigation was completed. The employee was released [redacted] from employment for using profane language towards a resident in a common area of the residence.

The Executive Director or designee will conduct and complete retraining on 55 Pa. Code § 2800.42(b) with all team members no later than February 29, 2024. Additionally, training will continue at hire, annually, and as warranted by the Executive Director or designee.

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented [redacted] 03/22/2024)

42s Privacy - self/possessions

2. Requirements

2800.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

On [redacted], at approximately [redacted] staff member C used a cellular phone to record an incident involving resident [redacted] and staff member D without their knowledge.

Plan of Correction

Accept [redacted] - 02/20/2024)

Staff member C was verbally educated by the Executive Director on [redacted] regarding recording of persons without their knowledge. The Executive Director provided Staff Member C reminder training no later than [redacted] regarding use of photographs and videos at the residence. Staff member C deleted the recording from his/her phone.

The Executive Director or designee will conduct and complete retraining on 55 Pa. Code § 2800.42(s) with all team members no later than February 29, 2024. Additionally, training will continue at hire, annually, and as warranted by the Executive Director or designee.

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented [redacted] - 03/22/2024)

65e Rights/Abuse 40 Hours

3. Requirements

2800.

65e Rights/Abuse 40 Hours (continued)

- 65.e. Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:
 1. Resident rights.
 2. Emergency medical plan.
 3. Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102).
 4. Reporting of reportable incidents and conditions.
 5. Safe management techniques.
 6. Core competency training that includes the following:
 - i. Person-centered care.
 - ii. Communication, problem solving and relationship skills.
 - iii. Nutritional support according to resident preference.

Description of Violation

Staff Member A, employed on [REDACTED] has not yet completed training in the following requirements within their first 40 hours: Resident rights, Emergency medical plan, Mandatory reporting of abuse and neglect, Reporting of reportable incidents and conditions, Safe management techniques and Core competency training.

Plan of Correction

Accept [REDACTED] - 02/20/2024)

Staff Member A's completed the training on or before [REDACTED].

Existing team members' training will be verified for completion by the Executive Director or designee no later than [REDACTED]. If a team member does not have the training, it will be completed as soon as practicable but no later than [REDACTED]. Training documentation will be maintained.

At hire the Executive Director or designee will complete the training with the new team members within 40 hours. Weekly audits of new hire training 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: 03/30/2024

Implemented [REDACTED] 03/22/2024)

65g Initial direct care training

4. Requirements

2800.

- 65.g. Direct care staff persons may not provide unsupervised assisted living services until completion of 18 hours of training in the following areas:
 1. Training that includes a demonstration of job duties, followed by supervised practice.
 2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.
 3. Initial direct care staff person training to include the following:
 - i. Safe management techniques.
 - ii. ADLs and IADLs
 - iii. Personal hygiene.
 - iv. Care of residents with mental illness, neurological impairments, an intellectual disability and other mental disabilities.
 - v. The normal aging-cognitive, psychological and functional abilities of individuals who are older.
 - vi. Implementation of the initial assessment, annual assessment and support plan.

65g Initial direct care training (continued)

- vii. Nutrition, food handling and sanitation.
- viii. Recreation, socialization, community resources, social services and activities in the community.
- ix. Gerontology.
- x. Staff person supervision, if applicable.
- xi. Care and needs of residents with special emphasis on the residents being served in the residence.
- xii. Safety management and hazard prevention.
- xiii. Universal precautions.
- xiv. The requirements of this chapter.
- xv. The signs and symptoms of infections and infection control.
- xvi. Care for individuals with mobility needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the residence.
- xvii. Behavioral management techniques.
- xviii. Understanding of the resident’s assessment and how to implement the resident’s support plan.
- xix. Person-centered care and aging in place.

Description of Violation

Direct care staff member A hired on [REDACTED] and staff member B hired on [REDACTED], began providing unsupervised assisted living services on their hire dates. However, they have not yet completed the Department approved direct care training course and passed the competency test.

Plan of Correction

Accept [REDACTED] 02/20/2024)

Staff Member A’s completed the training on [REDACTED] and Staff Member B’s training will be completed on or before [REDACTED]

Existing team members’ training will be verified for completion by the Executive Director or designee no later than [REDACTED]. If a team member does not have the training, it will be completed as soon as practicable but no later than [REDACTED]. Training documentation will be maintained.

At hire the Executive Director or designee will complete the Department-approved direct care training course with the new team member prior to providing care services to the residents. The Executive Director or designee will conduct weekly audits of new hire training 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: 03/30/2024

Implemented [REDACTED] 03/22/2024)