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

April 10, 2024

[redacted]
GOLDEN HEIGHTS OPCO LLC
[redacted]

RE: GOLDEN HEIGHTS PERSONAL CARE HOME
3522 ROUTE 130
IRWIN, PA, 15642
LICENSE/COC#: 45030

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/23/2024 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: *GOLDEN HEIGHTS PERSONAL CARE HOME* **License #**: *45030* **License Expiration**: *03/01/2024*

Address: *3522 ROUTE 130, IRWIN, PA 15642*

County: *WESTMORELAND* **Region**: *WESTERN*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *GOLDEN HEIGHTS OPCO LLC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: **Total Daily Staff**: *87* **Waking Staff**: *65*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint* **Exit Conference Date**: *01/26/2024*

Inspection Dates and Department Representative

01/23/2024 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *75* **Residents Served**: *57*

Secured Dementia Care Unit

In Home: *No* **Area**: **Capacity**: **Residents Served**:

Hospice

Current Residents: *9*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *57*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *30* **Have Physical Disability**: *1*

Inspections / Reviews

01/23/2024 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *02/08/2024*

02/16/2024 - POC Submission

Submitted By: [redacted] **Date Submitted**: *04/10/2024*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *02/23/2024*

Inspections / Reviews *(continued)*

02/21/2024 - POC Submission

Submitted By: [redacted] **Date Submitted:** *04/10/2024*

Reviewer: [redacted] **Follow-Up Type:** *Document Submission* **Follow-Up Date:** *04/10/2024*

04/10/2024 - Document Submission

Submitted By: [redacted] **Date Submitted:** *04/10/2024*

Reviewer: [redacted] **Follow-Up Type:** *Not Required*

42c - Treatment of Residents

1. Requirements

2600.
42.c. A resident shall be treated with dignity and respect.

Description of Violation

On [redacted] at approximately [redacted], staff member A went into resident [redacted] bedroom to transfer resident [redacted] out of [redacted] recliner and into [redacted] wheelchair to take resident [redacted] to breakfast. Shortly after staff member A entered the bedroom, staff member B entered resident [redacted] bedroom, and in a loud voice, repeatedly yelled that resident [redacted] was "laying in [redacted] own filth" and that it was "disgusting", before staff member B began to transfer resident [redacted] to [redacted] wheelchair. During the transfer, resident [redacted] said to staff member B, "you're not going to treat me this way". At that point, staff member B sat resident [redacted] back down in the recliner and left the bedroom.

Plan of Correction ***Accept [redacted] - 02/21/2024)***

By all employees attending quarterly training by Area Agencies of Aging on how to report anytime of abuse and along with annual training on resident abuse, Staff A was aware that Staff B's mannerism towards resident [redacted] the morning of [redacted] was not right and needed to be reported and Staff A came to the office to report incident. Administrator and Administrator Assistant spoke to Staff B in which he acknowledges he should not have spoken to resident [redacted] in that manner. Staff person B also had the same training as Staff A prior to this incident therefore unsure why this incident occurred since Staff B has been educated. Documentation can be provided to show the annual training and education of resident's rights in employee file upon hire that Staff B has done prior to this incident.
What was one to fix the problem: Immediately Staff person A contacted Protective Services by phone and completed the Mandatory Abuse reporting form on [redacted] and sent by email to Area Agencies of Aging, Administrator completed the reportable incident report to the department and Staff B was sent home that morning on [redacted] and suspend until further notice. Protective Services came out on [redacted] to investigate the incident and the state inspector came on [redacted] for their investigation. The facility completed their internal investigation and determined this was a one-time incident with Staff B however for other reasons unrelated to this incident staff B was terminated on [redacted].
How to prevent this from happening again: Administrator contacted the Ombudsman to schedule an in-person in-service on Resident's Rights on [redacted] at [redacted] for current employees and the ombudsman is to bring in material for review for all new hires. Quarterly training is ongoing with Area Agency of Aging and the facility will be inviting the Ombudsman back in October 2024 during resident's right month to speak to employees. The facility will continue with annual training on Resident's rights, along with information that is in all new hire employee packets. Resident Care Coordinator and/or Administrator will speak with one resident every week focusing on dignity and respect by employees, document of the audit can be provided with the first on [redacted] and weekly thereafter. Documentation can be provided to show this.
The first month's audits with the residents will be completed by [redacted] and with all interviews/audits with 4 to 5 residents to be completed by end of every month.
Awaiting to confirm a date with Area Agency of Aging for March 2024 in-service on how to abuse and abuse reporting.
Resident Abuse and rights training is Scheduled for the month of April-2024

The documentation of education will be kept in accordance with 2600.65i for all scheduled trainings. This documentation is kept in the training binder that is kept in the business office including the [redacted] training. The AAA training will be done on [redacted], at [redacted] with the education documentation to be placed in the

42c - Treatment of Residents (continued)

training binder that is kept in the business office.
The resident's rights training will be done on [redacted], given by the Administrator with the education documentation to be placed in the training binder that is kept in the business office.
The home's next Quality management review meeting in the Administrator's office with the Administrator and the Administrator Assistant is on [redacted] with the documentation of this review placed in the Quality Management binder that is kept in the business office.

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

Implemented [redacted] - 04/10/2024)