

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

May 7, 2024

[REDACTED]
PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP LLC
[REDACTED]

RE: PARAMOUNT SENIOR LIVING AT
PETERS TOWNSHIP
240 CEDAR HILL DRIVE
MCMURRAY, PA, 15317
LICENSE/COC#: 44346

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/13/2024 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: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP License #: 44346 License Expiration: 03/14/2025
Address: 240 CEDAR HILL DRIVE, MCMURRAY, PA 15317
County: WASHINGTON Region: WESTERN

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: PARAMOUNT SENIOR LIVING AT PETERS TOWNSHIP LLC
Address: [Redacted]
Phone: 7249691040 Email: NSHUMAN@PARAMOUNTHR.ORG

Certificate(s) of Occupancy

Type: I-2 Date: 12/17/2015 Issued By: Peters Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 140 Waking Staff: 105

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 03/28/2024

Inspection Dates and Department Representative

03/13/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 Residents Served: 87

Secured Dementia Care Unit

In Home: Yes Area: 2nd floor Capacity: 34 Residents Served: 14

Hospice

Current Residents: 12

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 87
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 2
Have Mobility Need: 53 Have Physical Disability: 0

Inspections / Reviews

03/13/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 04/07/2024

Inspections / Reviews *(continued)*

04/08/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/06/2024

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/12/2024

04/12/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/06/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/02/2024

05/07/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/06/2024

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

In the evening on or around [REDACTED], resident [REDACTED] progress notes indicate resident [REDACTED] was observed by a private care giver in the secured dementia care unit (SDCU) dining room standing behind resident [REDACTED] fondling [REDACTED] breasts. Resident [REDACTED] progress notes also indicate numerous other incidents, to include the following:

- [REDACTED] at [REDACTED]: "[Resident [REDACTED] was redirected this shift away from one certain [REDACTED] resident".
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] has been following [REDACTED] resident up and down the hallway throughout the morning. Resident was then found in another residents room sitting on the bed with the female resident".
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] continues to follow [resident [REDACTED], [resident [REDACTED] had [REDACTED] out in front of [resident [REDACTED] was redirected several times to go into [REDACTED] room and watch tv".
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] was following around [resident [REDACTED] a little after lunch".
- [REDACTED] at [REDACTED]: "While in MDR, [Resident [REDACTED] had [REDACTED] hands down [REDACTED] pants and was pulling [REDACTED] out of pants".
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] followed around [resident [REDACTED] again this evening. Resident was caught with hand down [REDACTED] pants several times by multiple staff. Resident was also caught with [REDACTED] out of [REDACTED] pants in the hall"
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] is roaming halls saying [REDACTED] is getting exercise. [Resident [REDACTED] has been redirected multiple times away from a certain resident".
- [REDACTED] at [REDACTED]: "[Resident [REDACTED] is pacing hallways more than [REDACTED] normal. [Resident [REDACTED] was redirected several times this shift from one particular [REDACTED] resident".

Plan of Correction

Accept [REDACTED] 04/12/2024)

1. MD notified on [REDACTED] of behaviors and [REDACTED] ordered, 2/11/24 MD notified regarding behaviors and Psych Consult ordered, [REDACTED] MD notified regarding behaviors continuing and medication changed to [REDACTED]. Resident [REDACTED] placed on 1 hour checks to be done by the nursing staff on 2/9/24, engage in activities and redirect as needed by staff. Psych Nurse saw resident 1 on 2/13/24. Behavior documentation monitored by Resident Care Manager or designee daily. Documentation of orders kept.
2. Nursing staff will be educated on abuse and neglect, supervision and intervention by Executive Director or designee by April 12, 2024. Documentation will be kept.
3. Executive Director or designee will educate nursing staff in the identification, assessment, reporting and management of behavioral symptoms, including resident to resident altercations/touching/etc by April 30, 2024. Documentation will be kept.
4. Starting April 4, 2024 Executive Director or designee will monitor daily behavior documentation on resident [REDACTED] and resident 2. Documentation will be kept.
5. Executive Director or designee will educate nursing staff on supervision and intervention of behaviors for 2 months starting April 16, 2024. Documentation will be kept. Articles for education included.
6. Executive Director or designee will monitor supervision in Memory Care three times a week starting week of April 8, 2024 for 2 weeks, twice a week for 2 weeks then weekly for 2 weeks. Documentation will be kept.
7. Executive Director will add Abuse/Neglect/Resident Behavior Monitoring to the Next Quality Meeting 5/2/24. Documentation will be kept.
8. Executive Director changed staff report in Memory Care on 3/27/24 to be in the hall/activity room so residents

42b - Abuse (continued)

are visible during report. Staff instructed to walkie for assistance if staff needed to supervise while providing care to multiple residents.

9. Behavior charting is done on residents displaying inappropriate behaviors by the nursing staff in PCC and on the 24 hour report. Residents are observed and monitored as identified by nursing staff and the Resident Care Manager or designee will decide frequency of observation based on the severity of behaviors.

Proposed Overall Completion Date: 04/11/2024

Licensee's Proposed Overall Completion Date: 04/11/2024

Implemented [REDACTED] - 05/07/2024)