



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail

April 15, 2019

Ms. Gail Dooley
Assisted Living Administrator/
Director of Health Wellness
Simpson Meadows
101 Plaza Drive
Downingtown, Pennsylvania 19335

RE: Simpson Meadows
License #: 141180

Dear Ms. Dooley:

As a result of the Department's Bureau of Human Services Licensing inspection on November 29, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2800 (relating to Assisted Living Residence) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa. Code Ch. 2800 must be maintained.

Sincerely,

Mia Johnson

Mia Johnson
Human Services Licensing Supervisor

Enclosure
Violation Report

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

ALR Name: Simpson Meadows Assisted Living		License Number: 14118
Address: 101 Plaza Drive, Downingtown Pennsylvania 19335		County: Chester
Administrator: Gall Dooley		
Legal Entity Name:		
Legal Entity Address:		
Certificate(s) of Occupancy: C2 LP by Industrial Safety		
Type of Inspection: Incident		
Reason(s) for inspection(s): Staff-Resident abuse		
On-Site Inspections Dates and Department Representatives On-Site: 11/29/2018		
Off-Site Inspection Dates and Inspectors, if Applicable: n/a		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 81	Number of Residents who:	
Number of Residents Served: 52	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: Yes	Are 60 Years of Age or Older: 52	
Area: McKendree Gardens	Have Mental Illness: 0	
Secured Unit Capacity, if Applicable: 18	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 17	Have a Mobility Need: 25	
Number of Current Hospice Residents: 7	Have a Physical Disability: 1	
Number of Hospice Residents in past year: 23		

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.42C- A resident shall be treated with dignity and respect.
Violation On 10/11/2018, An incident was reported by the Residence. The incident involved Staff "A" being disrespectful to Resident "1" when assisting with ADL. Resident "1" sustained a scratch on her neck from Staff "A". Staff A was given multiple disciplinary warnings for her lack of dignity and respect towards her job responsibilities before incident on 10/11/2018 transpired.
Plan of Correction

Please see attached POC.

See attached 4/13/19 *MDJ*

Printed Name and Title of Legal Entity Representative (Required on all pages) <i>Gail B Dooley</i>	
Signature of Legal Entity Representative (Required on all pages) <i>Gail B Dooley</i>	Date <i>4/8/19</i>
DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>4/13/19</u> (Date)	Plan of correction implementation status as of <u>4/13/19</u> (Date)
The above plan of correction was approved by <u><i>MDJ</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented – Adequate Progress <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented

Simpson Meadows Plan of Correction

10/11/2018 – A reportable incident report was sent to DHS office after receiving a concern brought by the residents' son. He complained the overnight care associate was rough with his mother when she came to provide morning care. The Executive Director went to visit the resident to discuss the morning occurrence. The resident was not able to say much other than the care associate had not been respectful and was disgruntled as she needed to change her whole bed. The resident stated when the care associate turned her over she did it roughly and got a scratch on her neck. The charge nurse noted the scratch on her neck and notified the physician and her son. The resident stated her side hurt so the charge nurse examined her but there was no bruising observed. The resident stated "I don't believe she was trying to hurt me but she was not very nice." The Executive Director assured the resident and her son the care associate would not be back in the apartment and she did not need to be concerned. She also told the resident and her son an investigation would be done and she would respond back to them the following day, 10/12 and by 10/15, provide a resolution. The care associate was suspended pending further investigation.

Three residents were interviewed who resided around Resident #1. Two residents stated they had no interaction with the care associate. The third resident stated she had a problem either coming or going to the bathroom overnight and the care associate voice was mean and angry.

The overnight nurse was interviewed and stated she only saw the resident visually and the resident never said anything to her about poor care or any other concerns. The resident appeared happy when she passed her in the hallway.

The care associate was interviewed via telephone since there was no way she could come to work on 10/11 or 10/12 to discuss the incident. The care associate admitted going in to assist the resident close to 6am the morning of the 11th. She said the resident was very wet as was her bed. She denied turning the resident in bed in order to change the sheets. The care associate said she got the resident up and changed her and her bed linens. The care associate

stated the resident walked to the chair in the living room. She handed resident her make up bag and a glass of juice then left to take care of another resident. 10/12 – After review the care associates file, interviewing residents and speaking with the employee’s supervisor, the decision was made to terminate employment effective 10/12.

Resident #1 and her son were contacted and advised the investigation was complete and the care associate would not be caring for her again.

The CEO was contacted and advised of the incident and the care associate was being terminated.

The care associate was contacted and advised of employment termination on 10/12.

DHS was notified via email on 10/12 with the follow up action taken regarding this incident.

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Privacy Coding Document

Resident Number	Resident Name
1	Audrey Nelson
Staff Letter	Staff Name
A	Victoria Kollie