



**Sent via e-mail: dhoos@elmcroft.com**  
**MAILING DATE: February 14, 2019**

Mr. Brian K. Wood  
Vice President and Treasurer  
EC Opco Reading, LLC  
500 North Hurstbourne Parkway, Suite 200  
Louisville, Kentucky 40222

RE: Elmcroft of Reading  
9 Colin Court  
Reading, Pennsylvania 19606  
License #: 227160

Dear Mr. Wood:

As a result of the Department's Bureau of Human Services Licensing inspection on March 19, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) 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. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "M. Moskalczyk".

Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Violation Report



Violation Report: 22716 - 03/19/2019 - DeVries, Kristin

PCH Name: ELMCROFT OF READING

**1. REGULATION 55 Pa.Code §2600**

2600.201 - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself/herself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

**2a. DESCRIPTION OF VIOLATION**

Per staff interviews, Resident #1 frequently becomes physically aggressive during care. The home has not implemented positive interventions to modify or eliminate the behavior.

**3. PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

This regulation ensures that residents' behavioral needs are met in the least restrictive way possible.

This resident has a diagnosis of Dementia. Staff attended a Virtual Dementia Training sponsored by Berks Encore which addressed dementia and behaviors of residents with dementia. We also assigned a course on our Relias computer training Titled a day in the Life of Henry: A Dementia Experience, which was a training on the approach of caregivers towards residents with dementia.

This resident was also being seen and treated by his primary care physician as well as a psychiatrist for behavioral issues.

On February 19th, 2019, management of Elmcroft gave the resident a 30 written termination notice because we felt we could no longer meet his need in our setting and suggest to the family that they start looking for a skilled dementia unit to move resident to. We offered to help them if needed. Resident was on a waiting list for several different facilities, awaiting an open bed. Resident moved out on April 23rd, 2019 to a skilled dementia unit.

Moving forward our Training and Development Coordinator and the Executive Director or designee will ensure that staff will be trained on behaviors and approach for those residents with a diagnosis of dementia.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
(Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *DOREEN S HOOS* Date *5/16/19*

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 5-7-19  
(Date)

The above plan of correction was approved by MM  
(Initials)

Plan of correction implementation status as of 5-7-19  
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 22716 - 03/19/2019 - DeVries, Kristin  
 PCH Name: ELMCROFT OF READING

**1. REGULATION 55 Pa.Code §2600**

2600.227(c) - The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

**2a. DESCRIPTION OF VIOLATION**

Per interviews with staff, Resident #1 can become physically aggressive toward staff during care. The resident's assessment and support plan (RASP) dated 1-29-19 does not address this behavior.

**3. PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

This regulation ensures that each resident's needs are met, and that accountability for meeting those needs is firmly established.

This residents support plan did not address the residents aggressive behaviors at the time of inspection. It was added to his support plan the same day of the inspection.

The Support Nurse and the Resident Service Director or designee will insure that any change in a residents condition will be documented on his or her support plan at time of any significant change.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *J. S. Hoos*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *J. S. Hoos* Date *5/6/19*

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>5-7-19</u> (Date)	Plan of correction implementation status as of <u>5-7-19</u> (Date)
The above plan of correction was approved by <u>MM</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