

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

November 3, 2023

[REDACTED], EXECUTIVE DIRECTOR
PROVIDENCE PLACE OF DOVER ASSOCIATES
3377 FOX RUN ROAD
DOVER, PA, 17315

RE: PROVIDENCE PLACE OF DOVER
3377 FOX RUN ROAD
DOVER, PA, 17315
LICENSE/COC#: 33696

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/03/2023 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: PROVIDENCE PLACE OF DOVER **License #:** 33696 **License Expiration:** 02/11/2024

Address: 3377 FOX RUN ROAD, DOVER, PA 17315

County: YORK **Region:** CENTRAL

Administrator

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

Legal Entity

Name: PROVIDENCE PLACE OF DOVER ASSOCIATES

Address: 3377 FOX RUN ROAD, DOVER, PA, 17315

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2	Date: 05/21/2010	Issued By: Dover Township
Type: I-1	Date: 04/15/2023	Issued By: Dover Township
Type: C-2 LP	Date: 04/25/1998	Issued By: Labor and Industry

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 164 **Waking Staff:** 123

Inspection Information

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

Reason: Complaint, Incident **Exit Conference Date:** 10/03/2023

Inspection Dates and Department Representative

10/03/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 190 **Residents Served:** 120

Special Care Unit

In Home: Yes **Area:** Connections **Capacity:** 74 **Residents Served:** 42

Hospice

Current Residents: 8

Number of Residents Who:

Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 120
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 1
Have Mobility Need: 44	Have Physical Disability: 0

Inspections / Reviews

10/03/2023 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/29/2023

Inspections / Reviews (*continued*)

10/27/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/02/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/03/2023

11/03/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/02/2023

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

During the morning and afternoon of [REDACTED], Staff Member A was observed treating Resident # 1 harshly and with disrespect in the SDCU dining room. During breakfast, Staff Member A was heard speaking loudly, with rude verbiage, name calling and an aggressive tone of voice to the resident by at least two other co-workers. Later during the same day, Staff person A was observed holding the resident's wrists, and did not allow the Resident to use the rest room when requested while awaiting lunch.

Plan of Correction

Accept ([REDACTED] - 10/24/2023)

On [REDACTED] an initial investigation was initiated by the Executive Director and Director of Wellness. The alleged perpetrator was immediately suspended and left the property. After interviewing staff members, the resident, and the alleged perpetrator, the staff member was terminated from employment on [REDACTED]. Following the termination on [REDACTED], the Executive Director completed Resident Rights-Abuse In-services for all care staff. Residence will continue to complete criminal background checks during pre-employment. Residence will continue with new hire/onboarding process to educate new staff on resident rights and abuse. Residence will increase additional abuse training. Beginning December 5, 2023, residence will increase dementia training with our Director of Connections. (SDCU) The training to be utilized will be Positive Approach to Care (PAC). PAC training will be held quarterly, (in person) to ensure all staff receive this training annually. Quality Management quarterly meetings will review quarterly training and any incidents identified.

Proposed Overall Completion Date: 12/31/2023

Licensee's Proposed Overall Completion Date: 12/31/2023

Implemented ([REDACTED] - 11/03/2023)