

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 395395	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/24/2020
NAME OF PROVIDER OF SUPPLIER COLONIAL PARK CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP 800 KING RUSS ROAD HARRISBURG, PA 17109	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0600 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of facility documents, facility policy and staff interviews, it was determined that the facility failed to ensure that mental abuse was prevented when a video of a resident was taken by a staff member, without the resident's knowledge or consent for one of three residents reviewed. (Resident 3). Findings include: Review of facility policy Titled: Abuse, revised October 11, 2018, Employees, vendors, consultants, family members, visitors, or volunteers are prohibited from taking or using photographs or recordings in any manner that would demean or humiliate a resident(s). This would include using any type of equipment (e.g., cameras, smart phones, and other electronic devices) to take, keep, or distribute photographs and recordings on social media. Photographing or recording a resident or his/her private space without the resident's or designated representative's written consent, is prohibited. Regardless of consent, photographing or recording and/or keeping or distributing photographs or recordings of a resident and/or using them in a manner demeaning or humiliating to the resident shall be presumed to be abuse. Review of facility documentation revealed that on July 4, 2020, Nursing Assistant (NA1) posted a video to social media of water being splashed on Resident 3's face. Facility documentation also revealed the video was reported to the facility by several anonymous outside sources, as well as LPN1. Nursing Assistant 1 completed abuse training and reviewed the abuse policy on November 11, 2019. Review of Resident 3's clinical record revealed [DIAGNOSES REDACTED]. Further review of Resident 3's clinical record revealed a BIMS (Brief Interview of Mental Status - a tool used to assess a resident's cognitive status) score of 00, indicating the resident was severely cognitively impaired. During an interview with the Nursing Home Administrator, on July 24, 2020, at approximately at 3:30 PM, it was revealed, that taking a video of a resident is prohibited without resident consent. 28 Pa. Code 201.29(j) Resident rights.		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE	(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.