



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

PHONE: (717) 783-3670
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MAR 04 2010

Ms. Judy Paul, Administrator
Charles P. & Margaret E. Polk Foundation
Polk Personal Care
301 North Street
Millersburg, Pennsylvania 17061

Dear Ms. Paul:

As a result of the Department of Public Welfare's licensing inspection on February 5, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations 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. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Polk Personal Care, 301 North Street, Millersburg, Pennsylvania 17061		CURRENT LICENSE NUMBER 306870	
INSPECTION DATE(S) (Include all dates of the inspection) February 5, 2010		REGIONAL REPRESENTATIVE Michael Palermo and Ron Minnich	
SIGNATURE OF LEGAL ENTITY <i>Judy Paul, Admin.</i>	DATE 2/23/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Michael & Ron</i>	DATE 3/1/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
<p>65d Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following:</p> <p>(2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.</p> <p align="right">PCH Division Central Region Field Office</p> <p align="center">FEB 26 2010</p>	<p>Direct care staff A did not complete the Department-approved direct care training course or take the competency test.</p>	<p align="center">2/16/10</p>	<p>Direct Care Staff Person did complete on line test, presented it to Admin shortly after hire-on on about 11/15/09 - form mislaid or misplaced & could not be located; Caregiver retook test - copy of cert is attached as Exh "A"</p> <p>Plan for future - re-record training promptly do filing promptly</p>	<p align="center">MS 3/1/10</p>

RECEIVED

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SIGNATURE OF LEGAL ENTITY <i>Judy Paul</i>	DATE 2/23/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>	DATE 3/1/10

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<p>65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas:</p> <p>(1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. (2) Emergency preparedness procedures and recognition and response to crises and emergency situations. (3) Resident rights (under these regulations). (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention.</p>	<ul style="list-style-type: none"> Direct care staff B did not receive the required annual training in resident rights or falls and accident prevention. Ancillary staff C did not receive any of this training during the 11/08 to 10/09 training year. 	<p>Next session to be held May 2010 ① specific to Fire Safety ② specific to balance of topics</p>	<p>Staff meetings included training required under 65g Specific training by fire safety expert held each May - annual. Bal of 65g topics will be covered specifically documented each May with all staff. Certificate for these specific items will be placed in each staff file See attached Certificate Eph "B" Annual follow up</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable 3/1/10 <i>MES</i> Date Initials (DPW)</p>

3/20/10 Staff persons B and C will be trained in the topics they missed. *MES* 3/1/10

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(6) New population groups that are being served at the home that were not previously served, if applicable.		<i>May 2009</i>	<i>See page 2</i>	

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132e A fire drill shall be held during sleeping hours once every 6 months.	A sleeping hour fire drill was conducted on 12/22/09. The previous sleeping hour drill was conducted 11/26/08, more than 6 months prior to 12/22/09.	June 2010	<p>sleeping hour fire drills will be held every 6 months. The last drill for sleeping hrs was 12/09. The next will be June '10 and so on. Will make calendar accordingly so this will not be missed again.</p> <p align="right">Steps have been taken to correct violation; full compliance is not verifiable</p>	<p align="right">3/1/10 Date <i>MES</i> Initials (DPW)</p>

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187b The information in subsections 187a13 and 187a14 shall be recorded at the time the medication is administered.	Medication tech staff D indicated he/she initials the medication administration record for each medication while pouring it rather than initialing after the administration of the medication.	<i>already taken care of as of 2/10/10</i>	<i>Tech/med staff re-trained + reminded to place initials after administering meds. Follow up - constant training, reminders + observation by asst admin.</i>	<p align="right">Steps have been taken to correct violation; full compliance is not verifiable</p> <p align="right"><i>3/1/10</i> Date Initials (DPW) <i>MES</i></p>