

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LAURA B. SEGERS

LEGAL ENTITY

To operate LA CASA PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at 1502 E. WASHINGTON STREET, NEW CASTLE, PA 16101

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 13
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from May 24, 2010 until May 24, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **402110**

Robert E. Robinson

ISSUING OFFICER

Kevin T. Casey

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



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

ADULT RESIDENTIAL LICENSING

MAY 21 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Ms. Laura B. Segers, Owner/Administrator
Laura B. Segers
La Casa Personal Care Home
1502 E. Washington Street
New Castle, Pennsylvania 16101

Dear Ms. Segers:

As a result of the Department of Public Welfare's licensing inspection on March 3, 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

MAY 13 2010 Page 1 of 12

NAME AND ADDRESS OF PERSONAL CARE HOME		Adult Residential Licensing	CURRENT LICENSE NUMBER
La Casa Personal Care Home, 1502 E. Washington Street, New Castle, PA 16101			402110
INSPECTION DATE(S) (Include all dates of the inspection)		REGIONAL REPRESENTATIVE	
March 5, 2010		Michael Marini, Lisa Flinner-Alman	
SIGNATURE OF LEGAL ENTITY	DATE	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE
<i>Laura B Segers</i>	<i>5/11/10</i>	<i>Joe J. Segers (JJP)</i>	<i>5-17-10</i>

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
20b8 The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.	According to staff person A, the administrator, residents and designated persons do not receive quarterly statements.	<i>4/01/10</i>	<i>Quarterly statements have been prepared and distributed. Administrator will prepare statements at the end of each quarter.</i>	<i>5-17-10 JJP</i>

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

Western Region

MAY 13 2010

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<i>Laura B Segus</i>	<i>5/11/10</i>	<i>JYP</i>	<i>5-17-10</i>

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	DATE BY WHICH CORRECTION WILL BE COMPLETED	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)	DATE COMPLIANCE VERIFIED BY DPW
82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	There was a bottle of dishwasher detergent and a can of oven cleaner in an unlocked cabinet under the kitchen sink, a bottle of bleach, 3 cans of carpet cleaner and "Odoban" in the unlocked laundry room, a bottle of bleach in an unlocked cabinet by the door of the lower bathroom, a can of Clorox Disinfectant Spray in an unlocked cabinet under resident #1's bathroom sink, and a can of Magic Power bathroom cleaner and a can of Lysol on the table between the beds in bedroom #5, The labels had instructions to call	<i>3/5/10</i>	<i>Each resident has now been formally assessed as being safe to use or avoid poisonous materials. Documentation of this assessment is in their file. The home will monitor and address any changes in residents.</i>	<i>5-17-10 JYP</i>

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

Western Region

MAY 13 2010

NAME AND ADDRESS OF PERSONAL CARE HOME		CURRENT LICENSE NUMBER	
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<i>Laura B Segers</i>	<i>5/14/10</i>	<i>[Signature]</i>	<i>5-17-10</i>

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
	a poison control center or a physician if swallowed. The residents have not been assessed for the ability to safely handle poison.	<i>3/5/10</i>	<i>See previous page.</i>	

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<i>Laura B Segers</i>	<i>5/11/10</i>	<i>JJP</i>	<i>5-17-10</i>

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87 The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.	The exterior lights over the door of the emergency exit leading from resident #2's room did not function.	<i>3/5/10</i>	<i>Lightbulb was changed and light is now working. Administrator will check lights monthly to be sure they are always in working order.</i>	<i>5-17-10 JJP</i>

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

MAY 10 2010

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SIGNATURE OF LEGAL ENTITY <i>Laura B Segers</i>	DATE <i>5/11/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JSP</i>	DATE <i>5-17-10</i>

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121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	A piece of sheet rock was on the landing of the emergency exit off resident #3's bedroom.	<i>3/5/10</i>	<i>Sheet rock was removed from landing. Staff was re-trained regarding importance of keeping passageways clear. Administrators will monitor passageways.</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>5-17-10 JSP</i> Date Initials (DPW)

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<i>Laura B. Seizers</i>	<i>5/11/10</i>	<i>JFP</i>	<i>5-17-10</i>

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103f Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers shall be required in refrigerators and freezers.	There were no thermometers in refrigerator or freezer #1.	<i>3/5/10</i>	<i>Thermometers were placed in the freezer and refrigerator. Temperatures were found to be in compliance. Staff was re-trained regarding use of thermometers to monitor temperatures.</i>	<i>5-17-10 JFP</i>

6-15-10 Administrator will check weekly to ensure refrigerators & freezers have working thermometers. 5-17-10

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		DATE 5-17-10

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144c-2 The location of a smoking room or outside smoking area shall be a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.	Four residents were observed smoking on the front porch within 3 feet of the door. Second hand smoke presents a hazard to all who enter or exit the home.	3/6/10	The smoking area has now been moved to the backyard, away from common walkways and exits. Staff and residents have been notified of change. "No smoking" signs installed on porch.	Steps have been taken to correct violation; full compliance is not verifiable 5-17-10 <i>JJP</i> Date Initials (DPW)

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

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161b At least three nutritionally well-balanced meals shall be offered daily to the resident. Each meal shall include an alternative food and drink item from which the resident may choose.	The posted menu does not indicate what alternative food is available to the resident.	3/5/10	A list of alternative food choices has been prepared and posted. Staff has been trained. Residents have been notified. List will be updated according to residents' wishes.	5-17-10 <i>JFP</i>

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		DATE
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183f Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new	A vial of resident #4's insulin was opened and undated and had been being administered to the resident.	3/5/10 6-15-10	This resident self-administers [REDACTED] own insulin. The staff and this resident have been trained regarding the dating of insulin. Administer will monitor the insulin dates by checking any insulin in the home 2x per month to ensure it is dated when opened and not expired. 5-17-10 <i>[Signature]</i>	Steps have been taken to correct violation; full compliance is not verifiable <u>5-17-10</u> <i>[Signature]</i> Date Initials (DPW)

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MAY 10 2010

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placement on the day of departure from the home.		3/5/10	See previous page.	

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		DATE 5-17-10

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254c Resident records shall be stored in locked containers or a secured, enclosed area used solely for record storage and be accessible at all times to the administrator or the administrator's designee, and upon request, to the Department or representatives of the area agency on aging.	Empty medication blister cards were left in an unlocked wooden box on top of the medication cart. Resident identifiers and prescription information were printed on the cards.	3/16/10	A lock has now been installed on the box and staff has been trained in the importance of keeping residents' information private. Administer will monitor to be sure resident information is kept private.	5-17-10 <i>[Signature]</i>