

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to EMMANUEL HOME

LEGAL ENTITY

To operate EMMANUEL HOME

NAME OF FACILITY OR AGENCY

Located at 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857

(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 32

(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 June 3, 2010 until June 3, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **200530**

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

JUN 04 2010

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

Mr. William S. Hickey, Treasurer
Emmanuel Home
800 Priestly Avenue
Northumberland, Pennsylvania 17857

Dear Mr. Hickey:

As a result of the Department of Public Welfare's licensing inspection on March 18, 2010 and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

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

Kevin T. Casey
Deputy Secretary

Enclosure
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME Emmanuel Home, 800 Priestly Avenue, Northumberland, Pennsylvania 17857		CURRENT LICENSE NUMBER 200530	
INSPECTION DATE(S) (Include all dates of the inspection) March 18, 2010		REGIONAL REPRESENTATIVE Ann O'Haire & Gerald Dumas	
SIGNATURE OF LEGAL ENTITY <i>Robert J. Webb</i>	DATE 4-21-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Duane C. Valence</i>	DATE 5-21-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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>22a1 The following admission document shall be completed for each resident - Preadmission screening completed prior to admission on a form specified by the Department.</p> <p>224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.</p>	<p>Resident #1's pre-admission screening form, dated 2/11/10, was not checked to indicate is the resident's needs could be met by the home.</p>	<p>3-18-10</p>	<p>See Attachment</p>	<p>DCV 5-21-10</p>

RECEIVED

APR 23 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing

Robert J. Wells 4-21-10

Resident #1 - Regulation 55 Pa. Code 2600.22a1 and 224a

April 21, 2010

1. What specific changes will be made?

The Pre-Admission screening form for all residents will continue to be prepared as outlined in 55 Pa.Code Chapter 2600.22a1 and 224a. The Administrative Assistant will double check the form prepared by the Administrator or Resident Care Manager to insure that all boxes are properly checked and all questions have been adequately responded to.

2. Who will make the changes?

Administrator or Resident Care Manager

3, When will the change be made?

Effective immediately.

4. How will the change be made?

After the Administrator or Resident Care Manager completes forms as required by the Department of Public Welfare the Administrative Assistant will review them for accuracy and completion.

5. What system have you implemented to make sure that the same violation will not occur again and what training will be provided to your staff?

All completed documentation is sent to the Administrative Assistant for further review. She will review all documents for accuracy and required completion items.

6. Supporting documentation.

Re: [REDACTED] DOB: [REDACTED]

Attached is a copy of resident's Preadmission Screening form. Correction has been made by a check mark on page 3 of 3 in the Yes block of the section "THE NEEDS OF THIS INDIVIDUAL CAN BE MET BY THE SERVICES PROVIDED BY THIS PERSONAL CARE HOME"

7. Sign and date the top of each page.

DCV
5-21-10

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

NAME AND ADDRESS OF PERSONAL CARE HOME Emmanuel Home, 800 Priestly Avenue, Northumberland, Pennsylvania 17857		CURRENT LICENSE NUMBER 200530	
INSPECTION DATE(S) (Include all dates of the inspection) March 18, 2010		REGIONAL REPRESENTATIVE Ann O'Haire & Gerald Dumas	
SIGNATURE OF LEGAL ENTITY <i>Robert J. [Signature]</i>	DATE 4-21-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Daene [Signature]</i>	DATE 5-21-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
187d The home shall follow the directions of the prescriber.	The following medications were not available for Resident #2: Miralax, Polyethylene Glycol, 1 cap daily in 8 once of liquid by mouth PRN for constipation.	3-29-10	See Attachment	

RECEIVED

APR 23 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing

Robert J. Wall 4-21-10

Resident #2 - Regulation 55 Pa. Code 2600.187d

April 21, 2010

1. What specific changes will be made?

PRN "as needed" medications will be stocked for each resident with periodic review to insure availability. Orders will be reviewed and "as needed medications" will be removed if they are no longer needed or used by the resident. The doctor will be contacted to obtain an order to discontinue the medication. Disposal of medications will continue to be made according to regulatory guidelines.

2. Who will make the changes?

Administrator or Resident Care Manager

3, When will the change be made?

Effective immediately.

4. How will the change be made?

The Resident Care Manager will insure replacement of "as needed" medications when the current supply is used up or expired. If the medication is no longer in use by the resident and he/she requests discontinuation of the medication, the doctor will be contacted for an order to discontinue the medication. Medication Administration Records (MAR) are reviewed for accuracy for both daily and "as needed" medications. MAR's are reviewed by Emmanuel Home as protocol for accuracy monthly.

5. What system have you implemented to make sure that the same violation will not occur again and what training will be provided to your staff?

Staff have been instructed to notify the Resident Care Manager when a medication "as needed" has been depleted and should be replaced or discontinued. (see attached Emmanuel Home Medication Policy page 5 with change added)

6. Supporting documentation.

Re: 

1. Attached is a copy of the medication label dated 3/29/2010 for Miralax obtained for the resident use. This medication is now available for the resident to use "as needed".
2. Attached is a copy of Emmanuel Home's Medication Policy, page 5 with the change reflecting the added instruction regarding PRN medications.

7. Sign and date the top of each page.

RCV
5-21-10

Rohit J. Wall 4-21-10

Resident #2

Attachment:

1. Medication label substantiating replenishment of PRN Miralax medication for resident.
2. Emmanuel Home's Medication Policy, page 5 with changes as highlighted in paragraph 5. (PRN medications)