



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
HARRISBURG, PENNSYLVANIA 17102-1810

ADULT RESIDENTIAL LICENSING
Central Region Field Office
1401 North 7th Street
Harrisburg, Pennsylvania 17102-1810

PHONE: (717) 772-4673
FAX: (717) 783-3956
Toll Free: 1-800-882-1885

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: February 7, 2011

Ms. Evelyn Putt, PCHA/LPN
Rebecca's Personal Care Home, Inc.
5865 Lincoln Highway
Mann's Choice, Pennsylvania 15550

Re: Rebecca's at Everett
118 Masters Avenue
Everett, Pennsylvania 15537

Dear Ms. Putt:

As a result of the Department of Public Welfare's licensing inspection on September 2, 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.

Sincerely,

A handwritten signature in black ink, appearing to read 'M. Strauser'.

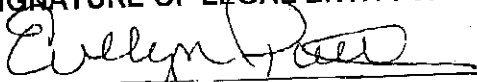
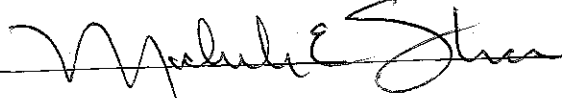
Michele Strauser
Regional Licensing Administrator

Enclosure
Violation Report

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

P.3

18146525090

NAME AND ADDRESS OF PERSONAL CARE HOME Rebecca's at Everett 118 Masters Avenue Everett, PA. 15537		CURRENT LICENSE NUMBER 324072
INSPECTION DATE(S) (Include all dates of the inspection) 9/2/10	REGIONAL REPRESENTATIVE D. McConnell, M. Palermo	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Evelyn Pate PCHA /DPW		
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 9/30/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 10/6/10

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
42s A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.	Resident bedroom #28 has no door to provide privacy for the residents. PCH Division Central Region Field Office	9/13/10	See attached page	M/S 10/6/10

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Rebecca's PCH Inc 814-6

Oct 01 10 01:47p

Regarding VR Page 1 of 3

See attachment

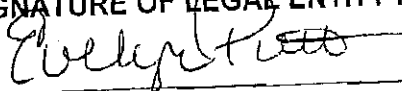
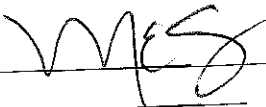
Short term correction

1. Temporary cover until door arrived
2. Residents from Room 28 signed statement the door has been hung.

Long term correction

1. Door was hung on September 13, 2010
2. If there is a need for additional doors to be replaced, door will be in facility to ensure that it can be hung immediately

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

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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Evelyn Putt PCHA/LPN			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 9/20/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 10/6/10

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
130b The smoke detectors specified in 130a shall also be located in hallways.	Resident bedroom #28 is 25' away from the nearest hallway smoke detector. Repeated Violation 3/4/10	9/2/10	See attached page	MES 10/6/10

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Rebecca's PCH Inc 814-6

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Regarding VR page 2 of 3
See attachment

Short term correction:

1. Smoke detector was installed on September 2, 2010. It is located within 9 feet of entrance of room 28.

Long term correction:

1. Owner and/or Administrator will check to be sure that all smoke detectors are within the specified locations outside of the bedrooms.

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

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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Evelyn Part PCHA / LPN</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Evelyn Part</i>	DATE 9/30/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>	DATE 10/6/10

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
187c If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.	Administrator A confirmed that the home did not document on the medication administration record the following medication refusals: <ul style="list-style-type: none"> • Resident #1 – (8/31/10) Systane Lub Eye Drops (4:30pm) • Resident #2 – (8/31/10) Ranitidine 150 mg (9pm) and Combivent Inhaler (9pm) 	10/13/10	See attached page	<p style="font-size: small;">Steps have been taken to correct violation; full compliance is not verified</p> <p style="font-size: small;">Date: 10/6/10 Initials: MES</p>

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REBECCAS PCH INC

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Regarding VR 3 of 3
See attachment

Short term correction

1. Administrator talked with Med Techs and reminded them of their duties as Med Techs.
2. Implemented a check list for all shifts when coming onto their shift, they will be going through the MARS to be ensure:
 - a. all medications are given
 - b. all PRN medications have been documented on the back of the MAR, along with the response
 - c. all refusals will be documented on the back of the MAR and the MD will be notified.

Long term correction

1. Administrator will be attending the Medication Training on October 12 & 13, 2010.
2. All staff, including Med Techs will be taking the DPW Administering Medications the Right way course to ensure that all Med Techs are trained the same way.