



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE**

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Room 230
Pittsburgh, Pennsylvania 15222

ADULT RESIDENTIAL LICENSING

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Mailing Date: **MAR 10 2011**

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 January 21, 2011 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 cursive script that reads "Jill Pezzino".

Jill Pezzino
Regional Licensing Administrator

Enclosure(s)

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

NAME AND ADDRESS OF PERSONAL CARE HOME LA CASA PERSONAL CARE HOME, 1502 E WASHINGTON STREET NEW CASTLE, PA 16101		CURRENT LICENSE NUMBER 402110	
INSPECTION DATES (Include all dates of the inspection) 01/21/2011		REGIONAL REPRESENTATIVE N. Mandock, C. Perry	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY <i>Laura B Segers</i>	DATE <i>2/17/2011</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Joe J. Regino (JRP)</i>	DATE <i>3-9-11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
88a Floors, walls, ceilings, windows, doors and other surfaces shall be clean, in good repair and free of hazards.	There is a hole approximately 6 inches in diameter in the ceiling in the home's kitchen. Per staff person A, water actively leaks from this hole after heavy rainstorms.	<i>2/15/2011</i>	<i>The hole has been filled and patched. Roof has been checked and sealed in any areas allowing water seepage. Administrator will monitor effectiveness of repair and address problems promptly.</i>	<i>3-9-11 JRP</i>
94b Interior stairs, exterior steps and ramps shall have nonskid surfaces.	The home's exterior ramp and stairs lack a non-skid surface.	<i>2/15/2011</i>	<i>Non-skid tape has been purchased and will be applied as soon as weather permits, or not later than 4/30/2011. Ramp and stairs are kept clear of ice and snow and well-salted. Areas are monitored daily by Administrators and staff.</i>	

Western Region

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SIGNATURE OF LEGAL ENTITY <i>Laura B Segers</i>	DATE <i>2/17/2011</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	DATE <i>3-9-11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
127a Portable space heaters are prohibited.	A portable space heater was observed in use in a resident bedroom located in the home's basement level by the exit door.	<i>1/21/2011</i>	<i>Space heater was removed immediately from room. Administrator later purchased and installed an electric wall heater mounted permanently to the wall, so as to ensure resident's comfort and safety.</i>	<i>3-9-11 JJP</i>

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SIGNATURE OF LEGAL ENTITY <i>Laura B Sezers</i>	DATE 2/17/2011	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	DATE 3-9-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
131a There shall be at least one operable fire extinguisher with a minimum 2-A rating for each floor, including the basement and attic.	There is no operable fire extinguisher on the home's third floor.	1/21/2011	Fire extinguisher was located and returned to its proper location on the 3rd floor. Administrator will check that each fire extinguisher is in its proper location during the monthly fire drills.	3-9-11 <i>JJP</i>

Western Region

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