



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: May 16, 2011

Mr. Michael B. Laign, President, CEO
Holy Redeemer Health System
1616 Hunting Pike
Meadowbrook, Pennsylvania 19046

Re: St. Joseph's Manor

Dear Mr. Laign:

As a result of the Department of Public Welfare's licensing inspection on February 15, 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,

Chevon Mitchell
Regional Licensing Administrator

Enclosure(s)
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME ST JOSEPH S MANOR, 1616 HUNTINGDON PIKE MEADOWBROOK, PA 19046		CURRENT LICENSE NUMBER 127940	
INSPECTION DATES (Include all dates of the inspection) 02/15/2011		REGIONAL REPRESENTATIVE Patricia Adams, Lori Knockstead	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Julia Regan, Personal Care Administrator</i>			
SIGNATURE OF LEGAL ENTITY <i>Julia Regan</i>	DATE <i>4/1/2011</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE <i>4/19/11</i>

REGULATION 55 Pa.Code §2600	VIOLATION	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
85a Sanitary conditions shall be maintained.	The home utilizes one handheld Accu Check Inform system for multiple residents who are required to have their blood sugar tested and are serviced by the affiliated Hospital's laboratory.	4/1/11	Sign agreement with Diabetic Supply Company to provide blood glucose monitors and all necessary supplies, including safety lancets which meet industry standards for quality, infection control and safety.	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> Steps have been taken to correct violation; full compliance is not verifiable </div> <div style="display: flex; justify-content: space-between; width: 100%;"> Date Initials (DPW) </div>
		4/1/11	Notify residents and POA of planned change for conducting "point of care" testing from Accu-Chek Inform Method to individual "point-of-care" monitors for each resident.	
		4/1/11	Notification to Physician and insurance company of use of new company for products related to individual "point-of-care" testing.	

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85a Sanitary conditions shall be maintained.	The home utilizes one handheld Accu Check Inform system for multiple residents who are required to have their blood sugar tested and are serviced by the affiliated Hospital's laboratory.	4/8/11	Delivery of all individual Blood Glucose Monitors	
		4/8/11	Delivery of all supplies related to the individual "point-of-care testing"	
		4/15/11	New individual "Point-of-Care Testing" Policy/Procedure Education and Competency Demonstration for all Personal Care Staff	
		4/15/11	Implement policy/procedure for individual "point of care" testing.	
		4/15/11 & On-going	To insure that this violation does not recur, all new Residents who require "point of care" testing will have individual blood glucose monitors.	