



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
100 LACKAWANNA AVENUE
ROOM 330, SCRANTON STATE OFFICE BUILDING
SCRANTON, PENNSYLVANIA 18503-1923

ADULT RESIDENTIAL LICENSING

PHONE: (570) 963-3209
1-800-833-5095
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CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: March 18, 2011

Mr. Frank Minelli, President
Angel's Family Manor, Inc.
218 North Main Avenue
Scranton, Pennsylvania 18504

Dear Mr. Minelli:

As a result of the Department of Public Welfare's licensing inspection on March 7, 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,

Michele Moskalczyk

Regional Licensing Administrator

Enclosure
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME ANGEL S FAMILY MANOR INC, 218 NORTH MAIN AVENUE SCRANTON, PA 18504		CURRENT LICENSE NUMBER 210620	
INSPECTION DATES (Include all dates of the inspection) 03/07/2011		REGIONAL REPRESENTATIVE Tom Shopay, Ryan Novak	
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 	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3-18-11

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
101h A resident shall be able to access toilet, hand washing and bathing facilities without having to pass through another resident's bedroom.	The area on the third floor of the home known as #302 consists of a common area, bathroom, an area for four (4) beds and a private room within the area. The resident residing in the private room must pass through the other occupants area in order to utilize the bathroom.	4-20-11	<p>The Home will install a dividing wall so that the private room resident does not pass through the other resident Bed room. The wall will be installed by the homes maintenance person.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>Date: 3-18-11 Initials (DPW): <i>PE</i></p>

RECEIVED

MAR 17 2011

SCRANTON FIELD OFFICE
Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME ANGEL S FAMILY MANOR INC, 218 NORTH MAIN AVENUE SCRANTON, PA 18504		CURRENT LICENSE NUMBER 210620	
INSPECTION DATES (Include all dates of the inspection) 03/07/2011		REGIONAL REPRESENTATIVE Tom Shopay, Ryan Novak	
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>Janet Shnell</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Doree Calver</i>	DATE 3-18-11

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
101m A bedroom may not be used as an exit from or used as a passageway to another part of the home unless in an emergency situation.	The area on the third floor of the home known as #302 consists of a common area, bathroom, an area for four (4) beds and a private room within the area. The resident residing in the private room must pass through the other occupants area in order to enter and leave the private room.	4-20-11	<p style="font-size: 1.2em; margin: 0;"><i>The Home will install a dividing wall to separate resident Bed room and resident Private room, so resident don't have to pass through each other room. This will be done by the Lomas maintenance person</i></p>	<p style="font-size: 0.8em; margin: 0;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="font-size: 0.8em; margin: 0;">Date: <i>4-20-11</i> Initials (DPW): <i>DPW</i></p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME ANGEL S FAMILY MANOR INC, 218 NORTH MAIN AVENUE SCRANTON, PA 18504		CURRENT LICENSE NUMBER 210620	
INSPECTION DATES (Include all dates of the inspection) 03/07/2011		REGIONAL REPRESENTATIVE Tom Shopay, Ryan Novak	
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>Janet Merrill</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Doreen C Valence</i>	DATE 3-18-11

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
103e Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.	The following food products, not in their original shipping containers, were stored in the home's basement chest freezer and were not labeled/dated. 2 plastic bags of chicken nuggets 2 plastic bags of chicken patties 2 brown bags of hash browns	3-7-11	<p style="font-size: 1.2em; font-family: cursive;">All items were marked In the future supervisor and staff will ensure all items not in their original shipping containers will be properly marked</p>	DCU 3-18-11

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PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME ANGEL S FAMILY MANOR INC, 218 NORTH MAIN AVENUE SCRANTON, PA 18504		CURRENT LICENSE NUMBER 210620	
INSPECTION DATES (Include all dates of the inspection) 03/07/2011		REGIONAL REPRESENTATIVE Tom Shopay, Ryan Novak	
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>Frank M. Hill</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>June Colance</i>	DATE 3-18-11

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
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.	The home did not have thermometers in its basement walk-in refrigerator, chest freezer and upright freezer.	3-7-11	<i>Thermometers were put in refrigerator and freezer at time of inspection. In the future supervisor and staff will insure thermometers are in place.</i>	DCU 3-18-11

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