



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE**

**11 Stanwix Street
Room 230
Pittsburgh, Pennsylvania 15222**

ADULT RESIDENTIAL LICENSING

Phone: (412) 565-5616/5614
Toll Free: 1-888-322-3664
Fax: (412) 565-5633/565-2840
www.dpw.state.pa.us

Mailing Date: **SEP 21 2011**

Mr. Gregory J. Ulyan, Administrator
Bradford Ecumenical Home, Inc.
100 St. Francis Drive
Bradford, Pennsylvania 16701

RE: Chapel Ridge
200 St. Francis Drive
Bradford, Pennsylvania 16701

Dear Mr. Ulyan:

As a result of the Department of Public Welfare's licensing inspection on August 4, 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

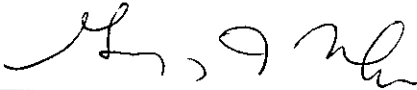

Enclosure(s)

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

NAME AND ADDRESS OF PERSONAL CARE HOME CHAPEL RIDGE, 200 ST FRANCIS DRIVE BRADFORD, PA 16701		CURRENT LICENSE NUMBER 426420	
INSPECTION DATES (Include all dates of the inspection) 08/04/2011		REGIONAL REPRESENTATIVE N. Mandock	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <p style="text-align: center; margin-left: 100px;">Gregory S. Ulyan</p>			
SIGNATURE OF LEGAL ENTITY 	DATE 9/8/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 9-20-11

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
15a The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.	An allegation of abuse against resident #1 was reported to staff person A on 06/25/11 and to staff person B on 06/26/11. The allegation was reported to the local area on aging by the resident on 06/27/11. <p style="text-align: center; font-size: 1.2em;">Western Region</p> <p style="text-align: center; font-size: 1.2em;">Adult Residential Licensing</p>	9/8/11	The following Plan of Correction is being submitted by Chapel Ridge as mandated by the Commonwealth of Pennsylvania, Department of Public Welfare. However, this response does not constitute agreement with the findings specified in this document. On June 25 and 26, 2011, Resident # 1 was complaining to staff against [redacted] roommate. [redacted] did not want to stay in [redacted] apartment with [redacted] roommate. Staff offered [redacted] alternate sleeping arrangements in our guest room. [redacted] refused. On June 27, 2011, Resident #1 explained the situation to the Administrator. After discussion about roommates working together and getting along, the Administrator gave the resident information to contact the local Ombudsman to offer counseling assistance. The Ombudsman interviewed Resident #1 and met with the Administrator on June 30. Ombudsman and staff kept in touch for 4 weeks trying to work out an amicable solution to the roommate's disagreements, including moving furniture and placing an extra microwave and refrigerator in the apartment. Resident #1 was given many opportunities to alleviate the situation or move to another facility until another shared apartment became available at Chapel Ridge, which [redacted] declined.	9-20-11

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

NAME AND ADDRESS OF PERSONAL CARE HOME CHAPEL RIDGE, 200 ST FRANCIS DRIVE BRADFORD, PA 16701		CURRENT LICENSE NUMBER 426420	
INSPECTION DATES (Include all dates of the inspection) 08/04/2011		REGIONAL REPRESENTATIVE N. Mandock	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Gregory S. Ulyan</i>			
SIGNATURE OF LEGAL ENTITY 	DATE 9/8/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 9-20-11

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
15a The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.	An allegation of abuse against resident #1 was reported to staff person A on 06/25/11 and to staff person B on 06/26/11. The allegation was reported to the local area on aging by the resident on 06/27/11. Western Region Adult Residential Licensing	9/8/11	Continued from Page 1 On July 28, 2011 the Ombudsman and the Administrator again discussed the situation. The Ombudsman spoke to her supervisor, who suggested we submit an Act 13 report. The Act 13 report and the Reportable Incident document were filed on July 28, 2011. The subsequent investigation by the Ombudsman and the Care Manager for the Office of Protective Services were dropped when Resident #1 was moved to the next available shared apartment on August 4, 2011. To comply with DPW regulations, we submit the following plan of correction: 1. Direct Care staff were retrained at a monthly in-service on August 30 on the proper notification procedures for a suspected claim of abuse. (See attached nurse's notes) 2. All staff will receive their annual OAPSA training by the Office of Human Services Protective Services supervisor on September 8. 3. All residents will be asked to attend an educational presentation on abuse and proper reporting on 9/8/11. 4. Administration will monitor resident requests daily through morning reports with staff. It is important to note that throughout the investigations, no abuse was found by any member of the investigating teams and no enforcement was necessary.	