





COMMONWEALTH OF PENNSYLVANIA  
 DEPARTMENT OF PUBLIC WELFARE  
 PO BOX 2675  
 HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

PHONE: (717) 783-3670  
 FAX: (717) 783-5662

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: OCT 25 2011**

Ms. Romona Donahue, Administrator  
 Kevin & Romona Donahue  
 1143 Lapish Road  
 Pittsburgh, Pennsylvania 15212

RE: Donahue's Personal Care I  
 1610 Hybla Street  
 Pittsburgh, Pennsylvania 15212

Dear Ms. Donahue:

As a result of the Department of Public Welfare's (Department) licensing inspection on August 24, 2011 and September 26, 2011 of the above personal care home, we found that violations specified for your previous PROVISIONAL license have not been corrected and we found new violations not found during our previous inspection.

A SECOND PROVISIONAL license is being issued based on substantial compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Your PROVISIONAL license is enclosed.

All violations specified on the 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.

Pursuant to 62 P.S. 1085-1087 and 55 Pa.Code §§ 2600.261-268 (relating to enforcement), the Department intends to assess a fine for the following violations unless fully corrected on or before the mandated correction date.

55 Pa.Code Chapter 2600 Section no.	Class of Violation	Census at Inspection	Fine Per resident X Per day	Calculated Fine = Per day	Mandated Correction Date (to avoid Fine)
121a	III	16	\$3	\$48	15 calendar days from mailing date of this letter

A fine will be assessed on a daily basis beginning with the date of this letter and will continue until the violation is fully corrected, and full compliance with the regulation has been achieved. If the violation is fully corrected, and full compliance with the regulation has been achieved, by the mandated correction date, no fine will be assessed. You must notify the Department's Regional Adult Residential Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. The Department will conduct an on-site inspection after the mandated correction date, and within 20 calendar days of the date of this letter. If one or more violations is not fully corrected and full compliance with the regulation has not been achieved, you will periodically receive invoices from the Department's Bureau of Financial Operations with payment instructions. The fines will continue to accumulate until the violation is fully corrected and full compliance with the regulation has been achieved.

Once you receive your invoice from the Bureau of Financial Operations, if you disagree with the amount of the penalty, you have the right to appeal through a hearing before the Bureau of Hearings and Appeals, Department of Public Welfare. If you decide to appeal, a written request to appeal the fine must be received, along with the assessed daily fine, not to exceed \$500, in accordance with 55 Pa.Code § 2600.263 (relating to appeal of penalty). All appeal requests must be sent to the address indicated on the invoice you will receive from the Bureau of Financial Operations.

If you disagree with the decision to issue a PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Public Welfare in accordance with 1 Pa.Code Part II, Chs. 31-35. If you decide to appeal, a written request for an appeal must be received within 10 days of the date of this letter by:

Jacob Herzing, Enforcement Manager  
Adult Residential Licensing  
Department of Public Welfare  
423 Health and Welfare Building  
Seventh and Forster Streets  
Harrisburg, Pennsylvania 17120

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

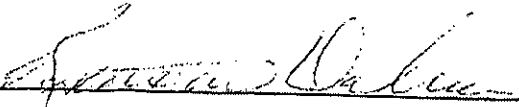
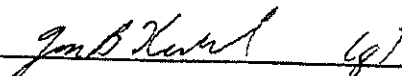
Sincerely,



Ronald Melusky  
Director

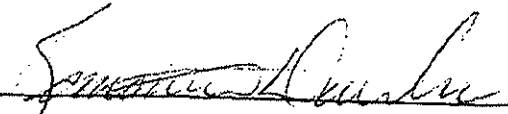
Enclosures  
License  
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME DONAHUE S PERSONAL CARE I, 1610 HYBLA STREET PITTSBURGH, PA 15212		CURRENT LICENSE NUMBER 430341	
INSPECTION DATES (Include all dates of the inspection) 08/24/2011		REGIONAL REPRESENTATIVE A. Schumacher, J. Kimberland	
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 8/24/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  (g)	DATE 9-22-11

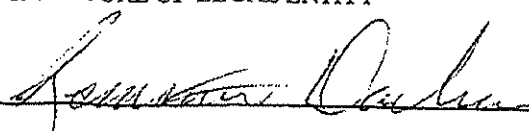
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
25b 25b - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.	The contract for resident #3, dated 12/9/10, was not signed by the resident.  Western Region  Adult Residential Licensing	8/24/11	Contract sign date of inspection. Contract was explained to resident at time of admission - might have been distracted at the time. Contract will be re-fully looked over at time of admission to make sure all documentation are noted.	10-7-11 g

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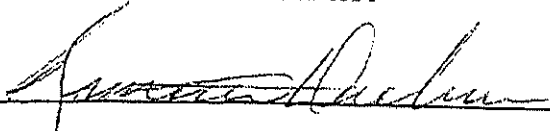
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42g A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the home.	Resident #4 takes out the trash for the home daily. Staff person A confirmed that resident #4 performs this work for the home. Resident #4 is not compensated in accordance with Federal and State Labor Laws for work performed for the home.  Upon arrival at the home Resident #5 was mopping the kitchen floor. Resident #5 stated that he/she was asked to mop the floor by staff person A. Resident #5 also stated that he/she also washes the dishes for the home on a regular basis. Staff person A confirmed that resident #5 performs this work for the home. Resident #5 is not compensated in accordance with Federal and State Labor Laws for work performed for the home.		<p>11-7-11 - Residents #4 and #5 will no longer perform labor on behalf of the home without compensation. If any resident performs labor on behalf of the home, such labor will be voluntary and the resident will be compensated in accordance with State and Federal labor laws.</p> <p>11-1-11 - All staff and residents will be educated that any labor performed by a resident on behalf of the home, will be voluntary and the resident will be compensated in accordance with State and Federal labor laws. Documentation of education will be kept.</p> <p>11-1-11 - The administrator will interview at least two different residents on a weekly basis for three months and biannually thereafter, to ensure no residents are performing labor on behalf of the home or if residents are performing labor on behalf of the home the residents are compensated in accordance with State and Federal labor laws. Documentation of interviews will be kept.</p>	

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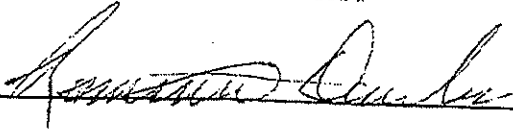
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85a Sanitary conditions shall be maintained.	There was an accumulation of urine around the base of the toilet in the second floor bathroom. There was also a strong odor of urine.		<p>11-1-11 - The area was cleaned at the time of inspection.</p> <p>10/10/11 - All staff persons will be educated on maintaining sanitary conditions and the reporting methods for unsanitary conditions. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily on each shift for sanitary conditions including sanitary conditions in all bathrooms. Documentation will be kept.</p> <p>11-1-11 - The administrator will check the home weekly to ensure sanitary conditions are maintained including sanitary conditions in all bathrooms. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10-7-11</p> <p>Date <span style="float: right;">Initials (DPW)</span></p>

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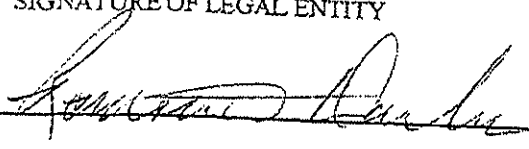
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85d Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	The large green trash can in the kitchen was not covered and was 1/4 full of trash.		<p>11-1-11 - The trash can was covered at the time of inspection and staff were educated to keep all trash cans covered.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure all trash receptacles in the kitchen are covered. Documentation will be kept.</p> <p>11-7-11 - The administrator will check the home weekly to ensure trash receptacles in the kitchen are covered. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10-7-11 Date Initials (DPW)</p>

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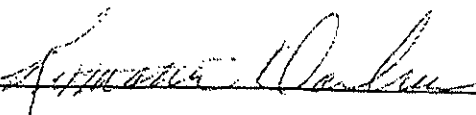
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85c Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.	There was a large uncovered cardboard box filled with pizza boxes on the side of the home.		<p>11-1-11 - All staff will be educated that all trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure all trash outside the home is kept in covered receptacles that prevent the penetration of insects and rodents. Documentation will be kept.</p> <p>11-1-11 - The administrator will check the home weekly to ensure all trash outside the home is kept in covered receptacles that prevent the penetration of insects and rodents. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10-7-11</p> <p>Date Initials (DPW)</p>

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92 Windows, including windows in doors, shall be in good repair and securely screened when doors or windows are open.	The window on the second floor, first bedroom on the left, was opened and did not have a screen.		<p>11-1-11 The window was closed at the time of inspection.</p> <p>11-1-11 - All staff will be educated that windows shall be securely screened when open. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure all windows are securely screened when opened. Documentation will be kept.</p> <p>11-1-11 - The administrator will check the home weekly to ensure all windows are securely screened when opened. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable.</p> <p>10-7-11</p> <p>Date Initials (DPW)</p>

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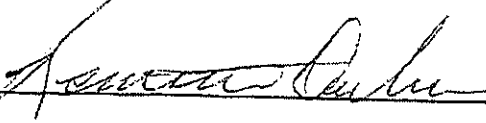
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101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	Bed #3 in the second floor bedroom, second on the left, does not have a source of light that can be turned on/off from bedside.  Bed #2 in the second floor bedroom, second on the right, does not have a source of light that can be turned on/off from bedside.	8/24/11	<i>Lamp placed near bedside the day of inspection. Resident 243 was explained not to move lamp was explained why the lamp needs to be at desk in this room. Staff instructed to check lamps during their shift to make sure they are in reach for the resident + to make sure they didn't move them.</i>	10-7-11 9
	Western Region			
	Adult Residential License g			

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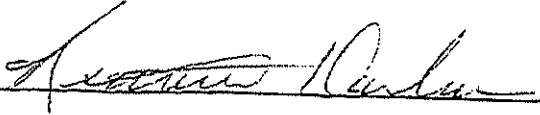
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105g1 To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.	There was a 1/2 inch accumulation of lint in the lint trap of the clothes dryer in the basement.		<p>11-1-11 - The lint trap was cleaned at the time of inspection</p> <p>11-1-11 - All staff will be educated on the fire risks and hazards associated with not cleaning the lint trap and that lint shall be removed from the lint trap and drum of the clothes dryer after each use. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure the lint from the lint trap and drum is removed from the lint trap and drum of the clothes dryer after each use. Documentation will be kept.</p> <p>11-6-11 - The administrator will check the home weekly to ensure the lint from the lint trap and drum is removed from the lint trap and drum of the clothes dryer after each use. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10-7-11</p> <p>Date: _____ Initials (DPW): _____</p>

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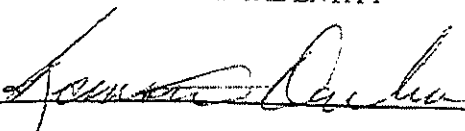
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121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	The exit door in the resident room leading to the exterior fire escape is blocked by a bed and a chair.  Repeated Violations: 03/17/2011		<p>11-1-11 - The furniture blocking the door was moved.</p> <p>- All staff persons will be educated that stairways, hallways, doorways, passageways and egress routes from rooms and from the building are unobstructed. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure all stairways, hallways, doorways, passageways and egress routes from rooms and from the building are unobstructed. Documentation will be kept.</p> <p>11-1-11 - The administrator will check the home weekly to ensure all stairways, hallways, doorways, passageways and egress routes from rooms and from the building are unobstructed. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10-7-11</p> <p>Date Initials (DPW)</p>

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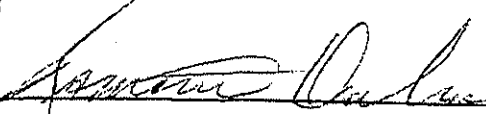
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125b Combustible materials shall be inaccessible to residents.	A propane cylinder was unlocked and accessible to residents under the exterior fire escape.		<p>11-1-11 - The propane cylinder was removed.</p> <p>- All staff persons will be educated that combustible materials shall be inaccessible to residents. Documentation of education will be kept.</p> <p>11-1-11 - A system will be developed and implemented to check the home daily to ensure combustible materials are inaccessible to residents. Documentation will be kept.</p> <p>11-1-11 - The administrator will check the home weekly to ensure combustible materials are inaccessible to residents. Documentation of checks will be kept.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable.</p> <p>10-7-11 Date Initials (DPW)</p>

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132b A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	The last fire safety inspection and drill conducted by a fire safety expert was 3/22/10.		11-1-11 - The administrator will submit the documentation of the fire safety inspection and fire drill conducted by the fire safety expert to the Department or the home will schedule a fire safety expert to conduct a fire safety inspection and fire drill and submit the documentation to the Department.	

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SIGNATURE OF LEGAL ENTITY 	DATE 9/22/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 9-22-11

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
227d Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.	Resident #1's medical evaluation dated 2/4/11 indicates the resident is diagnosed with paranoid bipolar. The resident's assessment dated 1/18/11 indicates the resident has a problem with anxiety but does not interfere with everyday functioning. The resident's support plan dated 1/18/11 does not indicate any behavioral care needs or services related to the resident's diagnosis or identified anxiety problem.  Resident #3's medical evaluation dated 12/9/10 indicates the resident is diagnosed with major depression-recurrent with psychotic features and schizoaffective disorder. The resident's assessment dated 12/9/10 indicates the resident has a problem with depression but does not interfere with everyday functioning. The resident's support plan dated 12/9/10 does not indicate any behavioral care needs or services related to the resident's diagnoses or identified depression problem.		11-1-11 - The home updated resident #3's and resident #4's support plan.  11-1-11 - All staff persons completing resident support plans will be educated on the proper completion of support plans including addressing all of the resident's behavioral care, need and services.  11-1-11 - The administrator or designated staff person will review all current and newly completed resident support plans to ensure all resident care, needs and services, including behavioral care needs and services, are documented on the residents' support plans.	Steps have been taken to correct violation; full compliance is not verifiable <u>10-7-11</u> Date Initials (DPW)