



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE**

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

ADULT RESIDENTIAL LICENSING

**Phone: (412) 565-5616/5614
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www.dpw.state.pa.us**

Mailing Date: **NOV 08 2011**

Ms. Jonelle M. Serge, LPN, PC Administrator
Countryside Convalescent Home Limited Partnership
Countryside Personal Care Home
8221 Lamor Road
Mercer, Pennsylvania 16137

Dear Ms. Serge:

As a result of the Department of Public Welfare's licensing inspection on October 8, 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.

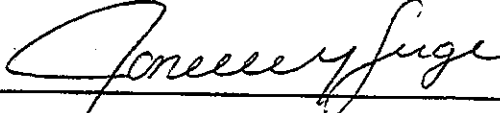
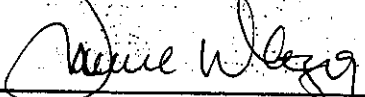
Sincerely,

A handwritten signature in cursive script that reads "Janine Wenzig".

**Janine Wenzig
Regional Licensing Administrator**

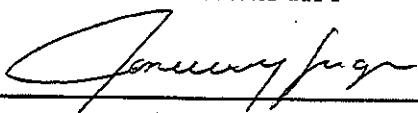
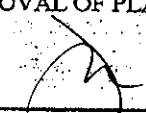
Enclosure(s)

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

NAME AND ADDRESS OF PERSONAL CARE HOME COUNTRYSIDE PERSONAL CARE HOME, 8221 LAMOR ROAD MERCER, PA 16137		CURRENT LICENSE NUMBER 460500	
INSPECTION DATES (Include all dates of the inspection) 10/08/2011		REGIONAL REPRESENTATIVE D. McConnell	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>JONELLE SERGE, PERSONAL CARE HOME ADMINISTRATOR</i>			
SIGNATURE OF LEGAL ENTITY 	DATE 10/21/2011	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-7-11

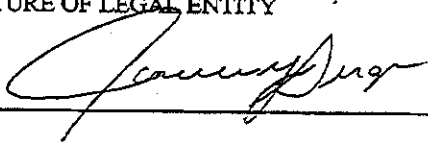
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
42b A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.	On 10/5/11, resident #1 was pushed by resident #2 causing resident #1 to fall. Resident #1 sustained a fractured right hip which required surgery. <p style="text-align: center; font-size: 1.2em;">Western Region</p> <p style="text-align: center;">OCT 21 2011</p>	10-5-11	<p>Immediate reporting to Law Enforcement, The Department of Public Welfare, and Local Agencies was completed upon notification of resident to resident altercation.</p> <p>Staff will be inserviced on abuse prevention and how to identify behavior patterns by November 7, 2011. Residents exhibiting a change in behavior patterns will be observed.</p> <p>Those with a change will be referred to our house Psychiatrist for further evaluation. Results will be submitted quarterly to Quality Assurance for review.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: center;"><u>11-7-11</u> Date Initials (DPW)</p>

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INSPECTION DATES (Include all dates of the inspection) 10/08/2011		REGIONAL REPRESENTATIVE D. McConnell	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Jovelle Serge, PERSONAL CARE HOME ADMINISTRATOR</i>			
SIGNATURE OF LEGAL ENTITY 	DATE <i>10/21/2011</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE <i>11-7-11</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
	<p style="font-size: 1.2em; margin: 0;">Western Region</p> <p style="font-size: 1.2em; margin: 0;">OCT 21 2011</p> <p style="font-size: 1.2em; margin: 0;">Adult Residential Licensing</p>			

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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
187d The home shall follow the directions of the prescriber.	The prescribed scheduled medication Advair, was not available for resident #1 on 10/4/11 and the medication was not administered.	<i>11/2/11</i> <i>10/21/11</i>	All Staff will be inserviced on proper ordering and documentation of prescription and over the counter medications required by the Prescriber by November 7, 2011. Personal Care Administrator or Designee will audit medications weekly for three weeks, and <i>monthly thereafter.</i> Results of audit will be submitted quarterly to Quality Assurance for review and recommendations.	Steps have been taken to correct violation, full compliance is not verifiable <i>Due 11/7/11</i> Date <i>11/7/11</i> Initials (DPW)
	Western Region OCT 21 2011			
	Adult Residential Licensing			