



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Mailing Date: FEB 25 2013

Mr. Jeffrey S. Long, President/CEO
St. Anne Home, Inc.
Villa Angela at St. Anne Home
685 Angela Drive
Greensburg, Pennsylvania 15601

Dear Mr. Long:

As a result of the Department of Public Welfare's (Department) licensing inspection on January 10, 2013, 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 Human Services Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in black ink that reads "Maria Stepanovich" with a stylized flourish at the end.

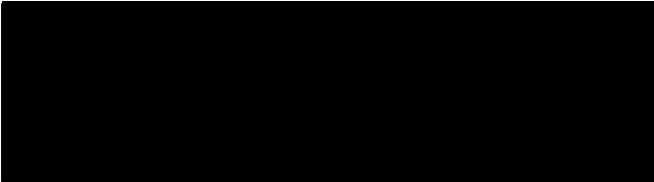
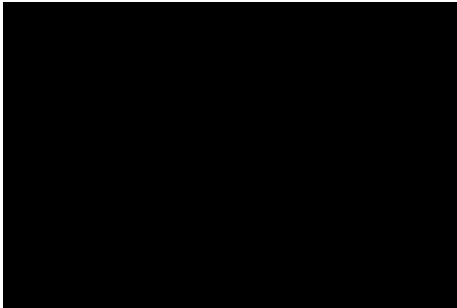
Maria Stepanovich
Regional Licensing Administrator

Enclosure(s)

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

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FEB 1 2013

PCH Name: VILLA ANGELA AT ST ANNE HOME		License Number: 428040
Address: 685 ANGELA DRIVE, GREENSBURG, PA 15601		County: Westmoreland
Administrator: Jennie Long		Region: WEST
Legal Entity Name: ST ANNE HOME INC		Western Field Office Adult Residential Licensing
Legal Entity Address: 685 ANGELA DRIVE, GREENSBURG, PA 15601		
Certificate(s) of Occupancy I-2 12/01/2010 City of Greensburg		
Staffing Hours Resident Support: 0 Total Daily Staff: 54 Waking Staff: 41		
Type of Inspection: Partial BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 01/10/2013: Glidden, Michelle		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 54 Number of Residents Served: 41 Secured Dementia Care Unit In Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

J. Long
 Jennie R. Long Director 1/31/2013

Violation Report: 42804 - 01/10/2013 - Glidden, Michelle
PCH Name: VILLA ANGELA AT ST ANNE HOME

FEB 1 2013

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's ^{Western Field Office} personal care home regional office or the ^{Adult Residential Licensing} personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 12/31/12 at approximately 8:30 PM, resident #1 reported to staff person A that staff person B had made him/her feel threatened and abandoned by leaving the resident in the middle of toileting and not telling the resident that another staff person would be assisting him/her. Resident #1 also told staff person A that staff person B had taken his/her cell phone and placed it out of reach of the resident, causing resident #1 to feel fearful of not being able to communicate with any other staff. The home did not submit an incident report to the Department until 1/4/13.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Exhibit #1

- Attachment 1a
- Attachment 1b
- Attachment 2a
- Attachment 2b
- Attachment 2c
- Attachment 2d
- Attachment 3

See home's attached plan of correction

See attachment A

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
(Required on EVERY Page) *Jennice Blong*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Jennice Blong Director* Date *1/3/13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1/14/13
(Date)

The above plan of correction was approved by MS
(Initials)

Plan of correction implementation status as of 2/14/13
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *MS*
- Partially Implemented - Inadequate Progress
- Not Implemented

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FEB 1 2013

Exhibit # 1

Western Field Office
Adult Residential Licensing

Regulation §2600.16 (c) (Page 2 of 2)

We take abuse allegations very seriously. The timeliness of reporting the incident is equally important. This is a situation that everyone has learned from. The director is going to utilize staff education to reinforce the importance of staff being timely in reporting events that need immediate attention.

The following are the steps being implemented to prevent this from happening again:

- ☼ Policy regarding administrator notification has been updated and handed out for licensed staff to read. They are required to sign a form that indicates understanding of the changes made. (Attachment 1a Policy # VA.ADM.NO.001) (Attachment 1b Licensed Staff signature sheets).
- ☼ Abuse policy will be reviewed with ALL staff at upcoming scheduled staff meeting Wednesday February 13, 2013 at 7 am and 1:30 pm (Attachment #2a Policy # CC.0008 Protection Against Resident Abuse, Neglect, and Misappropriation of Resident Property; Attachment 2b Act 13 of 1997 Mandatory Abuse Report Instruction Sheet; Attachment 2c Act 13 Mandatory Abuse Report; Attachment 2d Policy # VA.ADM.NO.004 Reportable incidents). (Staff signature sheets to follow when meetings have concluded).
- ☼ Regulations §2600. 16, 41-43 will be reviewed with staff to educate them regarding the regulations during the schedule staff meeting. (Attachment #3 Meeting Agenda)

MAIRA STEBANOVICH LMS) 2/14/13
Regional Licensing Approval of Plan of Correction
Maira Stepanovich

Jim Long
1/31/2013

Janice K Long Director