



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Mailing Date: **FEB 25 2013**

Ms. Cheryl L. Spiker, LPN/Administrator
Personal Care at Evergreen, Inc.
Personal Care at Evergreen
336 North Main Street
Washington, Pennsylvania 15301

Dear Ms. Spiker:

As a result of the Department of Public Welfare's (Department) licensing inspection on January 14, 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.

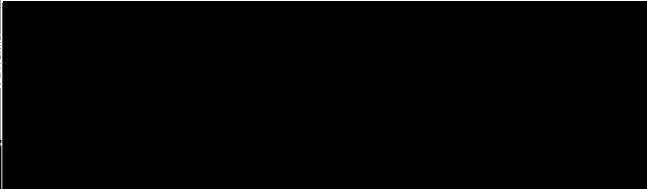
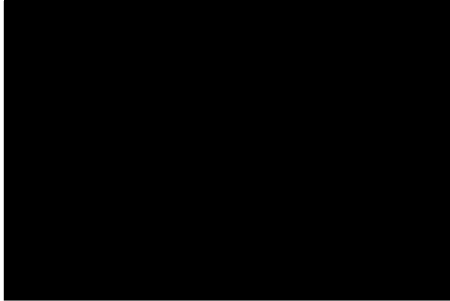
Sincerely,

A handwritten signature in black ink, appearing to read "Jill Pezzino".

Jill Pezzino
Regional Licensing Administrator

Enclosure(s)

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

PCH Name: PERSONAL CARE AT EVERGREEN		License Number: 400900
Address: 25 GLADE AVENUE, WAYNESBURG, PA 15370		County: Greene
Administrator: Amy Ponzoo		Region: WEST
Legal Entity Name: PERSONAL CARE AT EVERGREEN INC		
Legal Entity Address: 336 NORTH MAIN STREET, WASHINGTON, PA 15301		RECEIVED FEB 04 2013 WEST REGION FIELD OFFICE Human Services Licensing
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 48	Waking Staff: 36
Type of Inspection: Full	BHA Docket Number:	Notices: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 01/14/2013: Cutter, Jan		
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: 44 Number of Residents Served: 38 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

Violation Report: 40090 - 01/14/2013 - Cutter, Jan
 PCH Name: PERSONAL CARE AT EVERGREEN

RECEIVED

1. REGULATION 55 Pa.Code §2600
 2600.42(c) - A resident shall be treated with dignity and respect.

FEB 04 2013

WEST REGION FIELD OFFICE
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

On 12/28/2013 at the change of shift around 6:30 AM, Resident #1 was found to have dried stool caked to [REDACTED] legs, buttocks, hands, perineal area, underwear and bed sheets. The overnight shift failed to provide proper personal care to the resident.

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.

1. All ^{incontinent} residents will now be routinely checked every 2 hrs, even during sleeping hours.
2. Discussed & staff importance of proper hygiene.
3. Ombudsman is scheduled on 2/15 for interview on resident rights & dignity & respect.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Amy Pinzoo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Amy Pinzoo RN, Administrator* Date *2/4/13*

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

The above plan of correction is approved as of <u>2-6-13</u> (Date)	Plan of correction implementation status as of <u>2-6-13</u> (Date)
The above plan of correction was approved by <u><i>ASP</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented