



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 0 2 2013

Mr. Joseph G. Malisky, Senior Director
Presbyterian Senior Care, Inc.
Southminster Place
880 South Main Street
Washington, Pennsylvania 15301

Dear Mr. Malisky:

As a result of the Department of Public Welfare's licensing inspection on March 13, 2013 and March 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.

Your regular license for the period of June 24, 2013 to June 24, 2014 was issued on March 14, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky
Director

Enclosure
Violation Report

MAR 29 2013

VIOLETION REPORT
 PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600 Western Field Office of 7
 Adult Residential Licensing

PCH Name: SOUTHMINSTER PLACE		License Number: 415830
Address: 880 SOUTH MAIN STREET, WASHINGTON, PA 15301		County: Washington
Administrator: Glenn Delch		Region: WEST
Legal Entity Name: PRESBYTERIAN SENIOR CARE INC		
Legal Entity Address: 880 SOUTH MAIN STREET, WASHINGTON, PA 15301		
Certificate(s) of Occupancy 1-2 04/11/2002 South Strabano Township		
Staffing Hours Resident Support: 0 Total Daily Staff: 94 Working Staff: 71		
Type of Inspection: Full BHA Docket Number: Notice: Unannounced		
Reason(s) for Inspection(s) Renewal, Complaint		
On-Site Inspection Dates and Department Representatives On-Site 03/13/2013: Goeder, Caroline; Garrigan, Laurie 03/14/2013: Goodart, Caroline		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Date		
Licensed Capacity: 90 Number of Residents Served: 71 Secured Dementia Care Unit in Home: Yes Area: First Floor Secured Dementia Unit Capacity, if Applicable: 20 Number of Residents Served in Secured Dementia Care Unit, if applicable: 18 Number of Current Hospice Residents: 4 Number of Hospice Residents in past year: 16	Number of Residents who: Receive Supplemental Security Income: 0 Are 80 Years of Age or Older: 71 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 23 Have a Physical Disability: 0	

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Adult Residential Licensing

Violation Report: 41693 - 03/13/2013 - Goaden, Caroline	
PCH Name: SOUTHMINSTER PLACE	
1. REGULATION 85 Pa.Code §2800 2800.20(b)(3) - The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.	
2a. DESCRIPTION OF VIOLATION On 3/13/13, a cash disbursement of thirty dollars was made to resident #1. The home did not obtain the resident signature for the receipt of the disbursement.	
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. Home shall obtain a resident signature on the receipt for all cash disbursements per established written policy and procedure. Receipt for cash disbursement on 3/13/13 has been signed by resident #1 as of 3/20/13. All employees in the financial offices have been educated as to the proper procedure by 3/20/13.	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Joseph B. Malachuk SENIOR DIRECTOR 3-29-13	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>4-2-13</u> (Date)	Plan of correction implementation status as of <u>4-2-13</u> (Date)
The above plan of correction was approved by <u>[Signature]</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

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Western Field Office
Adult Residential Licensing Page 3 of 7

Violation Report: 41693 - 03/13/2013 - Goodell, Caroline
PCH Name: SOUTHMINSTER PLACE

1. REGULATION 56 Pa.Code §2400
2600.52 - Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.6102) and 6 Pa.Code Chapter 16 (relating to protective services for older adults) and other applicable regulations.

2a. DESCRIPTION OF VIOLATION
Staff person A lived outside of Pennsylvania within the two years prior to the 3/24/09 hire date. A federal criminal history check has not been completed for staff person A.

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.

Any person being considered for employment who has lived outside Pennsylvania within the prior two years shall have a federal criminal history check completed, per established policy and procedure.

Human Resource department has been educated per this policy and procedure. Staff person A who lived outside Pennsylvania within the two years prior to the 03/24/09 hire date shall have a federal criminal history check completed by April 12, 2013.

5-10-13 A designated staff person will review all current staff persons records to ensure the correct criminal history check has been performed and if needed a federal criminal history check will be completed.

5-10-13 The administrator and any staff person involved in the hiring and retention of staff will complete the on-line Older Adult Protective Services Act training. Documentation will be kept.
4-2-13 JGP

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

Signature of Legal Entity Representative
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative Date
(Required on EVERY Page) Joseph S. Malishev Director 3-29-13

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The above plan of correction is approved as of 4-2-13
(Date)

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

Plan of correction implementation status as of 4-2-13
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress JGP
- Partially Implemented - Inadequate Progress
- Not Implemented

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Adult Residential Licensing

Violation Report: 41693 - 03/13/2013 - Gcedert, Carolina PCH Name: SOUTHMINSTER PLACE	
1. REGULATION 55 Pa.Cpde §2600 2600.63(a) - At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.	
2a. DESCRIPTION OF VIOLATION On 3/12/13 from 10:30 PM through 6:00 AM, 71 residents were present in the home. During this time 1 staff person was present in the home who was certified in first aid and CPR.	
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. At all times there will be at 2 staff persons present in the home certified in 1st aid and CPR so that at least one person so trained is present for every 50 residents. <i>The administrator will audit the schedule weekly to ensure staff persons meeting the requirement are scheduled and present in the home.</i> <i>4-2-13 JJP</i>	
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Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE	
The above plan of correction is approved as of <u>4-2-13</u> (Date)	Plan of correction implementation status as of <u>4-2-13</u> (Date)
The above plan of correction was approved by <u>JJP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>JJP</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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Violation Report: 41593 - 03/13/2013 - Goodart, Caroline		Adult Residential Licensing	
PCH Name: SOUTHMINSTER PLACE			
<p>1. REGULATION 55 Pa.Code §2600 2600.132(b) - 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.</p>			
<p>2a. DESCRIPTION OF VIOLATION The most recent fire safety inspection and drill observed by a fire safety expert was conducted on 1/26/12.</p>			
<p>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.</p> <p>The fire safety inspection and drill observed by a fire safety expert has been completed on 3/20/13. The next annual inspection and drill shall be completed within 12 months of this date. Letter is attached.</p>			
Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date	
Joseph G. Wislisky		Senior Director 3-29-13	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of <u>4-2-13</u> (Date)		Plan of correction implementation status as of <u>4-2-13</u> (Date)	
The above plan of correction was approved by <u>[Signature]</u> (Initials)		<input checked="" type="checkbox"/> Fully Implemented <u>OSP</u> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

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Western Field Office Page 6 of 7
Adult Residential Licensing

Violation Report: 41693 - 03/13/2013 - Goeder, Caroline	
PCH Name: SOUTHMINSTER PLACE	
<p>1. REGULATION 55 Pa.Code §2500 2500.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.</p>	
<p>2a. DESCRIPTION OF VIOLATION The home does not have a maximum safe evacuation time or description of the fire safe areas in writing within the past year by a fire safety expert. The home's fire drill evacuation times are:</p>	
<p>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.</p> <p>The letter received as of 3/20/13 signed by the fire safety expert specifies the safe evacuation time in less than 4 minutes. The 3/20/13 letter also describes the fire safe areas.</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Joseph G. Malinsky Director 3-29-13	
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The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input checked="" type="checkbox"/> Fully implemented <u>[Signature]</u> <input type="checkbox"/> Partially implemented - Adequate Progress <input type="checkbox"/> Partially implemented - Inadequate Progress <input type="checkbox"/> Not implemented

MAR 29 2013

FIRE DRILL RECORDS
PERSONAL CARE HOMES - 56 Pa. Code Chapter 2600

Western Field Office
Adult Residential Licensing

POH Name: SOUTHMINSTER PLACE	Number: 415930
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Date	Time	Evac Time	Supervised by Fire Safety Expert
02/27/2013	10:00 AM	3 minutes 41 seconds	
01/30/2013	03:30 PM	3 minutes 58 seconds	
12/21/2012	01:30 PM	3 minutes 52 seconds	
11/26/2012	02:55 PM	3 minutes 40 seconds	
10/30/2012	10:45 PM	3 minutes 51 seconds	
09/29/2012	09:35 AM	3 minutes 41 seconds	
08/31/2012	02:45 PM	3 minutes 30 seconds	
07/27/2012	10:40 PM	3 minutes 51 seconds	
08/29/2012	01:00 PM	3 minutes 34 seconds	
05/31/2012	10:35 AM	3 minutes 55 seconds	
04/26/2012	08:30 AM	3 minutes 20 seconds	
03/28/2012	02:00 PM	3 minutes 45 seconds	

Inspection Date: 03/13/2013

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Adult Residential Licensing

Violation Report: 41693 - 03/13/2013 - Goodart, Caroline	
POH Name: SOUTHMINSTER PLACE	
1. REGULATION 55 Pa.Code §2600 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	
2a. DESCRIPTION OF VIOLATION Resident and staff person interviews indicated that the residents congregate in the hallways during fire drills. Administrator A stated that the residents do not evacuate into the stairwells during drills due to limited space on the stairwell landings. The home's hallways/wings have not been determined to be fire safe areas.	
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. Home is in the process of adding fire doors on the 2nd and 3rd floors to create fire safe areas which shall safely accommodate all residents on these floors by 5/1/13.	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Joseph C. Whalisky</u> ^{Senior} Director	
Date <u>3-29-13</u>	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
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The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <u>[Signature]</u> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented