



Sent via email to: [REDACTED]

MAILING DATE: October 2, 2013

Dolores L. Smith Sharer
Smith's Personal Care Home
47 Front Street, P.O. Box 65
Wyalusing, Pennsylvania 18853

Dear Ms. Smith Sharer:

As a result of the Department of Public Welfare's (Department) licensing inspection on June 27, 2013 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) 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 "Michele Moskalczyk".

Michele Moskalczyk
Regional Licensing Administrator

Enclosure

Violation Report: 23878 - 06/27/2013 - Rushin, Julienne

PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the 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 5/29/13 and 7/3/13, staff person "B" withheld resident #1's dinner as a form of punishment for not making it to the dinner table on time. The home failed to report either incident to the department.

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.

Regulation 2600.16c is important for us as the care home's responsibility for the safety and well being of our residents. The regulation requires us to report an incident within the 24 hours it occurs. This regulation was violated by the form of the abuse that happened in the home was never reported to the Department within the 24 hours the Department gives you. The violation was caused by staff person "B" withheld resident "1's dinner as a form of punishment for being late to the dinner table twice. Our home failed to report this incident to the Department.

To fix the violation, staff person " B" was addressed by the assistant administrator of the home and was also given a written warning and following was a suspension. The home will now report any abuse if occurs again. The actions we will take to prevent future occurrences will be to have more trainings and if something like this happens again we will take a training course on that topic. The responsible ones will be the staff, and the administrator.

yes

Repeat Violation: ~~No~~

Date(s) of Previous Violation(s): 4.15.13


Signature of Legal Entity Representative
(Required on EVERY Page) Chelsie Calaman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Chelsie Calaman Asst. Administrator

Date 7-22-13

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

The above plan of correction is approved as of 8/6/13
(Date)

The above plan of correction was approved by 
(Initials)

Plan of correction implementation status as of 8/6/13
(Date)

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

RV 4-15-13

Violation Report: 23878 - 06/27/2013 - Rushin, Julianne
 PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

On 5/29/13 and 7/3/13, staff person "B" withheld resident #1's dinner as a form of punishment for not making it to the dinner table on time. The resident was deprived of the goods and services provided by the home.

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.

The regulation is important to our home for the safeness and respect we want our residents to receive. A resident may not be neglected, intimidated or physically abused, etc. The regulation was violated when staff person "B" withheld residents "1's dinner from her twice for a form of punishment for being late to the dinner table. The resident was deprived of the goods and services provided by the home. The violation was caused by staff person "B" not feeding resident "1". To fix this violation from occurring again staff will be told they are not allowed to withhold residents meals as a form of punishment.

To prevent this from reoccurring, when we have a problem like this in our home we will hold trainings on the topics we need to cover in the future. The administrator and staff will be the responsible party.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) Chelsie Calaman

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Chelsie Calaman Assist. Administrator

Date 7-22-13

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The above plan of correction was approved by <u>M</u> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 23878 - 06/27/2013 - Rushin, Julienne

PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.56 - The administrator shall be present in the home an average of 20 hours or more per week, in each calendar month.

2a. DESCRIPTION OF VIOLATION

Based on Department Representatives presence in the home and conversations with staff, it has been verified that Administrator "A" has averaged 0 hours in the home from 6/21/13 to 7/12/13.

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.

Regulation says the administrator is to be in the home 20hours or more per week each calender month. This is important that way the administrator knows what is going on in the home, can keep up with paper work and is there for whomever to talk to when needed. This regulation was violated when the administrator had 0 hours between 6/21/13 to 7/12/13. The violation was caused by the administrator having a total of 0 hours that week. To fix the violation from happening again, the administrator will fix her schedule so she averages her 20hours per week. The responsible one for this to be fixed will be the administrator.

Repeat Violation: ^{yes} No	Date(s) of Previous Violation(s): 4-15-13		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Chelsie Calaman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Chelsie Calaman Assist. Administrator	Date 7-22-13
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(Initials)

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- RV 4-15-13

Violation Report: 23878 - 06/27/2013 - Rushin, Julienne

PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION

The most recent Medical Evaluation for resident #1, admitted 9/29/09, was completed on 10/5/11.

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.

A resident should have a medical evaluation yearly in case anything may change with health in that year span. The regulation was violated when resident "1" didn't have an annually med evaluation done. The cause of the violation was that resident "1" didn't have her annually med evaluation done. To fix the violation we have created a tickler system to help us stay more organized and to know when our residents are due for new forms. To prevent this from happening again we have started to use the tickler system to help us stay more organized with paper work. The responsible party will be the administrator.

Repeat Violation: ^{yes} No

Date(s) of Previous Violation(s): 4.15.13

Signature of Legal Entity Representative
(Required on EVERY Page) Chelsie Calaman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Chelsie Calaman Assist Administrator

Date 7-22-13

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RV 4.15.13

Violation Report: 23878 - 06/27/2013 - Rushin, Julienne

PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION

An Annual Resident Assessment has not been completed for resident #1, admitted 9/29/09.

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.

This regulation is important so we know how our residents health is doing and if there are any changes within the year span of the resident that we need to be aware about. This is why residents should have an annually med evaluation done. The regulation was violated because Resident "1" did not have an annual med evaluation done since 10/5/11 and was admitted to our home in 2009.

The cause of the violation is that we haven't had a current med evaluation done for Resident "1" since 2011 which is against regulations. To fix this violation we will have her med evaluation done immediately. To prevent future violations we have created a tickler system that we hope will help us stay up to date with our paperwork. The responsible party to prevent future violations will be the administrator.

Repeat Violation: ^{yes} No	Date(s) of Previous Violation(s): 4.15.13		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Chelsie Calaman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Chelsie Calaman Assist Administrator	Date 7-22-13
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RV 4-15-13