



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 30 2013

Mr. Jim Roberts, Director
Christian Residential Opportunities & Social Services, Inc.
712 Pinola Road
Shippensburg, Pennsylvania 17257

RE: Griffith House
1345 Apple Way
St. Thomas, Pennsylvania 17252

Dear Mr. Roberts:

As a result of the Department of Public Welfare's licensing inspection on July 10, 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 2600 must be maintained.

Your regular license for the period September 28, 2013 to September 28, 2014 was issued on June 17, 2013. Your regular license remains in good standing.

Sincerely,

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

Ronald Melusky
Director

Enclosure
License Inspection Summary

Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600
 2600.94(b) - Interior stairs, exterior steps and ramps must have nonskid surfaces.

2a. DESCRIPTION OF VIOLATION
 The wooden exterior fire escape leading from the second floor of the rear of the home does not have a non-skid surface.

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. The Property Comm. Has met in January 2013 and had approved the replacement of these stairs. An estimate was approved and they will be replaced Summer/early Fall 2013.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jim Roberts</i>	Date <i>Aug 7, 13</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>8-26-13</u> (Date)	Plan of correction implementation status as of <u>8-26-13</u> (Date)
The above plan of correction was approved by <u>JR</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

Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION
 The bed occupied by Resident #1 does not have a source of light that can be turned on/off from bedside.

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. Resident #1 has a lamp within reach of his bed.
2. Residents have been educated on the need to leave their bedside lamps where they are, by the Administrator/designee. -SE
3. If resident #1 does not leave his lamp where it has to be, a permanent one will be fastened to his headboard.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jenni Roberts</i>	Date <i>Aug 7, 13</i>
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Violation Report: 36335 - 07/10/2013 - McCloskey, Jason

PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600

2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION

The combination refrigerator/freezer in the utility room had a plastic bag with 7 precooked sausages. The bag was not labeled or dated.

An upright freezer in the utility room had 5 plastic containers of precooked food for Resident #2. The plastic containers were not labeled or dated.

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. Sausages were thrown away.
2. Plastic containers of food were thrown away.
3. Staff has been educated again on the need to properly label, date + store items in the freezer/refrigerator, by Administration - SE
4. Resident #2's family has been reminded on the need to label + date all food they bring into home, by Administration - SE
5. Administrator or designee will check food stores on a weekly basis to ensure food is labeled/dated. - SE

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Jim Roberts</u>	Date <u>Aug 7, 13</u>
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Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600
2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION
A package of sweet potato fries in an upright freezer in the utility room was opened and unsealed.

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. fries were thrown away.
- 2. Staff has been educated again on how to store food properly in freezer / refrigerator, by Administration. - *se*
- 3. Administrator or designee will check food stores weekly to ensure food is sealed. - *se*

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

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Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600
 2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home's emergency procedures are not posted in a conspicuous and public place in 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.

1. Home's Emergency Procedure has been posted in a conspicuous place.
2. Administrator will check location of Emergency Procedures monthly to maintain compliance. - BE

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

Signature of Legal Entity Representative (Required on EVERY Page) *Jim Roberts*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jim Roberts* Date *Aug 7, 13*

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Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600

2600.132(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.

2a. DESCRIPTION OF VIOLATION

The home does not have a designated evacuation time from a fire safety expert. The home's fire drill evacuation time for 10/25/12 was 2 minutes and 36 seconds.

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. A fire safety expert is coming the week of 8/13/13 to review our plans and give us an evacuation time.
2. We will then have a fire drill to see if we can make it out in the suggested time.
3. If not, we will contact the fire safety expert again to see what changes can be made.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Jim Roberts</u>	Date <u>Aug 7, 13</u>
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Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600

2600.186(c) - Changes in medication may only be made in writing by the prescriber, or in the case of an emergency, an alternate prescriber, except for circumstances in which oral orders may be accepted by nurses in accordance with regulations of the Department of State. The resident's medication record shall be updated as soon as the home receives written notice of the change.

2a. DESCRIPTION OF VIOLATION

On July 7, 2013, the medication administration record reflects a change in the dose of Olanzapine, one tablet by mouth at bedtime for Resident #3. The home had not received a written order from an authorized prescriber for this change and does not have registered nurses authorized to receive verbal orders.

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. A copy of said prescription has been obtained and is attached.

2. For future ^(changes or) prescriptions, a copy of the order will be obtained from the pharmacy, and kept by the home's Administration. *rb*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jimi Roberts

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Jim Roberts

Date *Aug 7, 13*

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Plan of correction implementation status as of *8-26-13*
 (Date)

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 (Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 36335 - 07/10/2013 - McCloskey, Jason
 PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record for Resident #3 does not include:
 * the diagnosis or purpose for the Sertraline 25 mg or Sertraline 100 mg.
 * the exact time of medication administration

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. MAR has been corrected.
 2. MAR's will be checked monthly to make sure they are correct, by the Administrator or designee.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Joni Roberts</i>	Date <i>Aug 7, 13</i>
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