



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]
MAILING DATE: December 1, 2014

Mr. Michell Staska-Pier, Executive Director
Phoebe Home Incorporated
1925 Turner Street
Allentown, Pennsylvania 18104

RE: The David A. Miller Personal Care Community
License #216170

Dear Mr. Staska-Pier:

As a result of the Department of Public Welfare's licensing inspection on September 25, 2014 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 must be maintained.

Sincerely,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 21617 - 09/25/2014 - Dumas, Gerald
 PCH Name: THE DAVID A. MILLER PERSONAL CARE COMMUNITY

1. REGULATION 55 Pa.Code §2600
 2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION
 The preadmission screening form for the following residents was incomplete as the screenings did not indicate if the home is able to meet the resident's needs:
 Resident # 1 date of screening 6/5/14
 Resident # 2 date of screening 6/17/14
 Resident # 3 date of screening 1/10/14

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.

Please review attached pages

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Joan Matura LPN M*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *JOAN MATURA LPN M* Date *11/10/14*

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

The above plan of correction is approved as of 11-25-14 (Date)
See attached pages.

The above plan of correction was approved by *[Signature]* (Initials)

Plan of correction implementation status as of 11-25-14 (Date)

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

55 PA Code 2600.224a. Plan Of Correction Implementation Immediately

- Admissions staff completes Screen
- Director of Admissions will review all screens for completion prior to each admission
- Screens will be audit monthly for compliance
- Results of audit will be reported and tracked through our Quarterly Quality Assurance program

Joan Matura LPN Manager
David A Miller Personal Care Community
License Number 21617

Joan Matura ANM 11/10/14

Anne Graziano
11-25-14