



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to MILTON DEVELOPMENTAL SERVICES INC

LEGAL ENTITY

To operate MILTON DEVELOPMENTAL SERVICES II

NAME OF FACILITY OR AGENCY

Located at 60 WALNUT STREET, P.O. BOX 416, MILTON, PA 17847

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 24
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from January 19, 2015 until January 19, 2016,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 202150

Robert E. Robinson
ISSUING OFFICER

[Signature]
DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 27 2015

Ms. Sandra L. Tristan, Director
Milton Developmental Services, Inc.
60 Walnut Street, PO Box 416
Milton, Pennsylvania 17847

RE: Milton Developmental Services II
License #: 202150

Dear Ms. Tristan:

As a result of the Department of Human Services' licensing inspection on December 2, 2014 and December 3, 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones".

Matthew J. Jones
Director _{SH}

Enclosures
License
License Inspection Summary

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

PCH Name: Milton Developmental Services		License Number: 20215
Address: 60 Walnut St., Milton, PA 17847		County: Northumberland
Administrator: Cynthia Catherman		Region: NORTHEAST
Legal Entity Name: Milton Developmental Services Inc.		
Legal Entity Address: 60 WALNUT ST PO BOX 416, MILTON, PA 17847		
Certificate(s) of Occupancy		
I-1 05/08/2008 Borough of Milton	C-2 LP 04/28/1980 Dept. of Labor & Industry	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 21	Waking Staff: 16
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
12/02/2014: Rushin, Julienne; Foulkes, Kimberli		
12/03/2014: Rushin, Julienne; Foulkes, Kimberli		
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: 24	Number of Residents who:	
Number of Residents Served: 21	Receive Supplemental Security Income: 14	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 6	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 21	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 0	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 0		

Violation Report: 20215 - 12/02/2014 - Rushin, Julianne
PCH Name: Milton Developmental Services

1. REGULATION 55 Pa.Code §2600
2600.64(c) - An administrator shall have at least 24 hours of annual training relating to the job duties.

2a. DESCRIPTION OF VIOLATION
Staff person 'A', the home's administrator, completed 23.5 of the required 24 hours of annual training.

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.

Total hours completed per training verification certificates was 23.50. The Administrator understands that a minimum of 24 hours of Annual TRAINING is required to maintain compliance. The training year is concurrent with the Calendar year so that on Nov 30 of each year an hour inventory will be completed so that any missing or miscalculated time can still be completed in that year. The Administrator will be responsible for this.

An hour of on line training was completed to meet the addition half hour of deficit training time

The administrator shall be responsible for ongoing compliance. Mr 2/6/15

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Cynthia M. Catherman* Date *2-4-15*

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

The above plan of correction is approved as of 2/6/15 (Date)

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

Plan of correction implementation status as of 2/6/15 (Date)

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

Violation Report: 20215 - 12/02/2014 - Rushin, Julienne
PCH Name: Milton Developmental Services

1. REGULATION 55 Pa.Code §2600
2600.68(a) - A staff training plan shall be developed annually.

2a. DESCRIPTION OF VIOLATION
The home's staff training plan for 2014 does not specify training topics, dates of training or who will conduct the training.

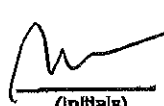
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The staff training plan has been revised to include specific dates for completion. In the event changes are made, revision will be indicated and dated. The Administrator is responsible for the development and implementation of the staff training plan. As the training year is concurrent with the calendar year, the 2015 TRAINING plan is submitted for verification of this correction of violation.

The administrator shall monitor and assure ongoing compliance.
M
2/6/15

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
Cynthia M. Cashman			12-30-14

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The above plan of correction was approved by	 (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: 20215 - 12/02/2014 - Rushin, Jullenne
PCH Name: Milton Developmental Services

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 refrigerator in the kitchen (not the home's main kitchen) had a deer park bottle of water that was opened that was not labeled or dated and peaches in a country crock container that was 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.

The Food items found to be in non-compliance were discarded immediately. All food items stored will be stored in compliance with Chapter 2600 regulations in closed containers and labeled correctly.
A written policy has been established specifically for residential refrigerator use, and reviewed with staff AND residents.
The on duty staff will make daily checks and the Adm will make periodic checks to ensure compliance.
The administrator shall monitor and assure ongoing compliance.

M 2/6/15

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) Cynthia M. Cathomas, Adm. Date 12-30-14

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Plan of correction Implementation status as of 2/6/15 (Date)

The above plan of correction was approved by *M* (Initials)

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Violation Report: 20215 - 12/02/2014 - Rushin, Julienne
PCH Name: Milton Developmental Services

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

2a. DESCRIPTION OF VIOLATION
The 1/4 stick of butter in the home's refrigerator (not in the main kitchen) 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.

The Food items found to Be in Non-compliance in the residential refrigerator (opened Butter) was discarded immediately. All Food stored will Be in compliance with the Chapter 2600 regulations
A written policy has been established and reviewed with both staff and residents to ensure compliance is maintained.
The staff on duty will make frequent refrigerator checks and the Administrator will monitor with occasional monthly checks.
The administrator shall monitor and assure ongoing compliance.
M 2/6/15

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
Christina M. Catherman Adm 12-30-14

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Violation Report: 20215 - 12/02/2014 - Rushin, Julianne
PCH Name: Milton Developmental Services

1. REGULATION 55 Pa.Code §2600
2600.144(c) - A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include 2600.144(c)1-3.

2a. DESCRIPTION OF VIOLATION
The home permits smoking in two designated areas on the property. One of the areas is in between the home and the church and the other is next to the home near the picnic tables. On 12/3/14 there was evidence, an ashtray with a cigarette butt, of smoking outside of the designated areas on the 2nd floor porch.

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.

Smoking is permitted outside the home only.
A tenant living in the 3rd floor apartment has access to the upper level porch. Although the smoking policy was reviewed, evidence of smoking was found. The policy was reviewed again and a copy was given.

Any future infractions will result in eviction.
The Adm will monitor to ensure safety and compliance.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Cynthia M. Cathers*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Cynthia M. Cathers Adm* Date *2-4-15*

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Plan of correction implementation status as of 2/6/15 (Date)

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- Partially Implemented - Inadequate Progress
- Not Implemented