



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 23 2015

Mr. Jeffrey S. Truhan, CEO/Administrator
The Shook Home
55 South Second Street
Chambersburg, Pennsylvania 17201

RE: Quarters at the Shook
License #: 355540

Dear Mr. Truhan:

As a result of the Department of Human Services' licensing inspection on December 10, 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.

Your regular license for the period June 17, 2015 to June 17, 2016 was issued on March 18, 2015. Your regular license remains in good standing.

Sincerely,

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

Matthew J. Jones
Director_{SH}

Enclosure
License Inspection Summary

Violation Report: 35554 - 12/10/2014 - McCloskey, Jason
 PCH Name: QUARTERS AT THE SHOOK

1. REGULATION 55 Pa.Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

The fire drill record for the drill conducted on 6/9/14 does not include the number of residents in the home, the number of residents evacuated, the number of staff participating, problems encountered during the drill or whether the alarm was operative.

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.

- See attached - Page 2 A of 3. - SE

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

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Lenora Theimer LPN PCHA* Date *12-19-2014*

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

The above plan of correction is approved as of 1-6-15
 (Date)

Plan of correction implementation status as of 1-6-15
 (Date)

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

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

The Quarters at The Shook Home

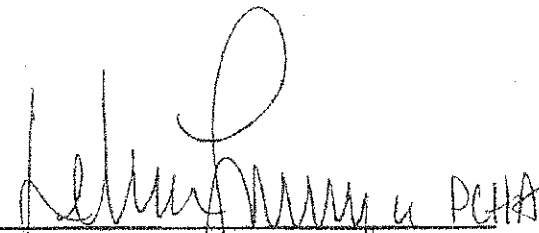
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Violation Report 355540

Plan of Correction

Regulation 55 Pa. Code 2600.132(c)

1. The Director of Plant Operations will be educated on the information required to be reported on the Fire Drill Log per 55 PA Code 2600.132 (c) by 12/31/2014.
2. The Director of Human Resources (or designee) and Corporate Compliance will audit the Fire Drill Logs monthly to ensure they contain all of the necessary information required by 55 PA Code 2600.132 (c) by 12/31/2014.
3. The Director of Human Resources (or designee) and Corporate Compliance will report the results of the audits to the Quality Assurance/Performance Committee monthly by 1/31/2015, to ensure the solutions are sustained over time. The audits will continue until no longer deemed necessary by the Committee.



Personal Care Home Administrator

12-19-2014
Date

Violation Report: 35554 - 12/10/2014 - McCloskey, Jason
 PCH Name: QUARTERS AT THE SHOOK

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's designated evacuation time as determined by a fire safety expert is 8 minutes and 0 seconds. The drill held on 2/13/14 took 8 minutes and 6 seconds. The drill held on 6/9/14 took 10 minutes.

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.

- See attached - Page 3 A & 3 B of 3 - ~~BE~~

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

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Lehoma Theimer LPN PCHA* Date *12-19-2014*

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Violation Report 355540

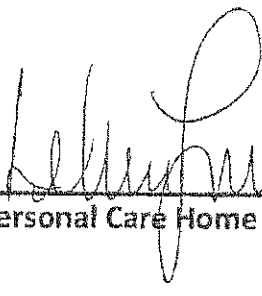
Plan of Correction

JE

Regulation 55 Pa. Code 2600.132 (D)

1. The clinical and ancillary staff will be educated on the need to evacuate residents to a fire safe area within the designated evacuation time (8minutes and 0 seconds) as determined by a fire safe expert by 12/31/2014.
2. Residents will be re-educated in writing on their obligation to participate in all Fire Drills as per the house rules by 12/31/2014.
3. The Director of Human Resources (or designee) and Corporate Compliance will audit the Fire Drill Logs monthly to ensure residents were evacuated to a fire safe area within the designated evacuation time (8minutes and 0 seconds) as determined by a fire safe expert by 12/31/2014.
4. Any Fire Drill in which residents were not evacuated to a fire safe area within the evacuation time (8 minutes and 0 seconds) as determined by a fire safe expert will be repeated in the same month until the desired outcome is achieved effective immediately.
5. The Director of Human Resources (or designee) and Corporate Compliance will report the results of the audits to the Quality Assurance/Performance Committee monthly by 1/31/2015, to ensure the solutions are sustained over time. The audits will continue until no longer deemed necessary by the Committee.

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Personal Care Home Administrator

12-19-2014
Date