



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 13 2015

Mr. Peter Pachuski, Secretary
Emmanuel Home
800 Priestly Avenue
Northumberland, Pennsylvania 17857

RE: Emmanuel Home
License #: 200530

Dear Mr. Pachuski:

As a result of the Department of Human Services' licensing inspection on February 26, 2015 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 May 25, 2015 to May 25, 2016 was issued on February 11, 2015. Your regular license remains in good standing.

Sincerely,

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

Matthew J. Jones
Director *MSH*

Enclosure
License Inspection Summary

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

PCH Name: EMMANUEL HOME		License Number: 20053
Address: 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857		County: Northumberland
Administrator: ROBERT DELBO		Region: NORTHEAST
Legal Entity Name: EMMANUEL HOME		
Legal Entity Address: 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857		
Certificate(s) of Occupancy		
C-2 LP	I-2	
06/21/0199	11/10/2010	
LABOR AND INDUSTRY	NORTHUMBERLAND BORO.	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 31	Waking Staff: 23
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
02/26/2015: Dumas, Gerald; Hummel, Jesse		
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: 38 Number of Residents Served: 31 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 1		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 31 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0

Violation Report: 20053 - 02/26/2015 - Dumas, Gerald
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600
 2600.54(a) - Direct care staff persons shall have the following qualifications:
 (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
 (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
 (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

2a. DESCRIPTION OF VIOLATION
 Direct care staff person A (Date of Hire 12/24/14) received a home school diploma from Beers Home School on 8/7/2007. The certificate is not certified by the United States Department of Education or The Pennsylvania Department of Education.

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.

Pls. submit verification of successful completion of GED w/in 6 months from date of inspection (2/20/15) 4-2-15

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) Robert J. Delbo, Administrator Date 3-11-15

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

The above plan of correction is approved as of <u>4-2-15</u> (Date)	Plan of correction implementation status as of <u>4-2-15</u> (Date)
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

p2A 83

Emmanuel Home
800 Priestley Ave.
Northumberland, PA 17857

March 12, 2015

Plan of Correction, PA Department of Human Services Inspection on February 26, 2015

Violation

1. Regulation 55 Pa. Code 2600.54(a)

Description of Violation: Direct care staff person A (Date of Hire 12/24/2014) received a home school diploma from Beers Home School on 6/7/2007. The certificate is not certified by the United States Dept. of Education or The Pennsylvania Dept. of Education.

Plan of Correction:

1. Why is the regulation important? The regulation ensures that direct care staff persons have the education and ability required to perform job duties specified by the home, including activities of daily living.
2. How was the regulation violated? Emmanuel Home failed to evaluate the accuracy of the diploma by not looking for US or PA Dept. of Certification on the form.
3. What caused the violation? The cause of the violation resulted from inadequate investigation of credentials of prospective new hires.
4. What can be done to fix the violation? The person in question was immediately suspended from her position until proper verification of her high school diploma can be made. We have substituted other staff members in her position until the problem is rectified. After speaking with the Department of Human Services Inspector we were informed that if she enrolls in a GED program and we can show official documentation of that enrollment, the employee may continue to be employed with the stipulation that the employee must complete the GED program within six months.
5. What can be done to prevent future violations? In the future Home School diplomas (as well as all HS diplomas) will be reviewed for proper certification as noted above. Questions or concerns regarding proper certification will be reviewed by the PA Department of Human Resources.
6. Who will be responsible for preventing future violations? The Resident Care Manager will screen all direct care staff new hires for proper documentation and certification. The Administrator will then review all new hire documentation for proper certification. If any doubts exist at this time the matter will be forwarded to PA Dept. of Human Services for review.

Robert J. Delbo
Robert J. Delbo
Administrator

March 12, 2015

Anne Stozian, RLA

4-2-15

Violation Report: 20053 - 02/26/2015 - Dumas, Gerald
 PCH Name: EMMANUEL HOME

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.
 Department Representatives observed the facility's fire drill log. A fire drill was held on 3/5/14 at 6:40am. The fire drill log indicates that there were 33 residents in the facility when the alarm sounded. The log incorrectly indicates that only 32 of the 33 residents present evacuated during the drill.

A fire drill was held on 11/14/14 at 8:30am. The fire drill log does not indicate the length of time it took to evacuate the residents, the number of residents that were evacuated during the drill, or the number of staff that participated in the drill.

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.

Repeat Violation: No.	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Robert J. Delbo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Robert J. Delbo, Administrator</i>	Date <i>3-11-15</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>4-2-15</u> (Date) The above plan of correction was approved by <i>[Signature]</i> (Initials)	Plan of correction implementation status as of <u>4-2-15</u> (Date) <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
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Emmanuel Home
800 Priestley Avenue
Northumberland Pa. 17857

p3A93

March 11, 2015

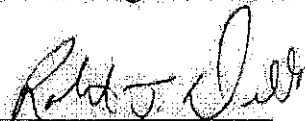
Plan of correction, Pa. Department of Human Services Inspection on February 26, 2015

Violation Report: 20053

Regulation 55 Pa. Code 2600.132(c)

1. Why is the regulation important? This regulation is important because it is designed to help inspectors review fire drills performed by personal care facilities, and to verify that all the required information is captured. Reviewing this documentation helps homes ensure compliance with all regulations relating to fire drills, and identify and correct any problems.
2. How was the regulation violated? Regulation was violated by not documenting the length of time it took for the fire drill, the number of residents evacuated, and the number of staff that participated in the drill.
3. What caused the violation? The cause of the violation was writing the time of the fire drill, the number of residents, and staff on a scrap piece of paper and then not transferring that information on the fire drill log.
4. What can be done right away to fix the violation? The fire drill log will be reviewed immediately after each fire drill to make sure all information is recorded accurately and completely. Also a tablet will be used so that all notes and details of each fire drill are to be kept with the fire drill log for any future reference.
5. What can we do to prevent future violations? Review the fire drill log when fire drill is complete to make sure all information and spaces are complete to ensure compliance.
6. Who will be responsible for preventing future violation? Administrator, Robert J. Delbo will be responsible to review and make sure all details and information are complete and in compliance with all the regulations relating to fire drills.

Signature of Legal Entity Representative



Printed Name and Title of Legal Entity Representative

Robert J. Delbo, Administrator

Date 3-11-15

Anne Graziano RLA
4-2-15