



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]  
MAILING DATE: September 21, 2015

Mr. Daniel J. Millett, Member  
Millett Pines, LLC  
101 Old Lackawanna Trail  
Clarks Summit, Pennsylvania 18411

RE: The Pines at Clarks Summit  
1300 Morgan Highway  
Clarks Summit, Pennsylvania 18411  
License #227120

Dear Mr. Millett:

As a result of the Department of Public Welfare's licensing inspection on July 8, 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.

Sincerely,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 22612 - 07/08/2015 - Harvey, Jason  
 PCH Name: THE PINES AT CLARKS SUMMIT

**1. REGULATION 55 Pa.Code §2600**

2600.65(d) - Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following:

- (1) Training that includes a demonstration of job duties, followed by supervised practice.
- (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.
- (3) Initial direct care staff person training to include the following:
  - (i) Safe management techniques.
  - (ii) ADLs and IADLs.
  - (iii) Personal hygiene.
  - (iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities.
  - (v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.
  - (vi) Implementation of the initial assessment, annual assessment and support plan.
  - (vii) Nutrition, food handling and sanitation.
  - (viii) Recreation, socialization, community resources, social services and activities in the community.
  - (ix) Gerontology.
  - (x) Staff person supervision, if applicable.
  - (xi) Care and needs of residents with special emphasis on the residents being served in the home.
  - (xii) Safety management and hazard prevention.
  - (xiii) Universal precautions.
  - (xiv) The requirements of this chapter.
  - (xv) Infection control.
  - (xvi) Care for individuals with mobility needs, such as prevention of decubitus ulcers (bed sores), incontinence, malnutrition and dehydration, if applicable to the residents served in the home.

**2a. DESCRIPTION OF VIOLATION**

On 7/4/2015 and 7/5/2015 director of housekeeping staff person A began providing unsupervised ADL services working as a direct care staff person. Staff person A did not complete the department-approved direct care training course and competency test.

**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.*

Regulation 2600.65 (d) is important to the safety of the residents because staff completion of the required training and passing of the test before performing unsupervised ADL services ensures that each individual who provides assistance with ADLs is properly trained. Although the staff person A did not take the direct care training test before she performed ADLs for the six (6) residents, staff person A was supervised by an LPN and med tech during the same shift. The violation was written because it was not known that the staff member was supervised. Since then, staff member A passed the direct care training test and proper staffing continues to be in place for the residents safety. The executive director will ensure all staff that will perform ADLs will take the direct care training test as part of new staff training *to ensure ongoing compliance*. Please see the following pages showing staff sign in sheet for July 4 and July 5, 2015 as well as staff person A certificate for direct care training test. Staff person B is an LPN and staff person C is a med tech.


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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Timothy Mullett*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *TIMOTHY MULLETT* Date *07/24/2015*

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

The above plan of correction is approved as of 9-18-15  
 (Date)

The above plan of correction was approved by   
 (Initials)

Plan of correction implementation status as of 9-18-15  
 (Date)

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