



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to MILLCREEK MANOR
LEGAL ENTITY

To operate REGENCY SUITES/REGENCY AT SOUTH SHORE
NAME OF FACILITY OR AGENCY

Located at 322 WASHINGTON PLACE, ERIE, PA 16505
(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 70
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 November 3, 2015 until November 3, 2016,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 446570

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

NOV 03 2015

Ms. Melanie Titzel, Director of Operations
Millcreek Manor
5515 Peach Street
Erie, Pennsylvania 16509

RE: Regency Suites/Regency at South Shore
322 Washington Place
Erie, Pennsylvania 16506
License #: 446570

Dear Ms. Titzel:

As a result of the Department of Human Services' licensing inspection on August 18, 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.

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

Sincerely,

Matthew J. Jones
Director

Enclosures
License
License Inspection Summary

SEP 30 2015

Violation Report: 44857 - 08/18/2015 - Hullquist, Cliff
PCH Name: REGENCY SUITES REGENCY AT SOUTH SHORE
WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION

There was no emergency service telephone numbers posted on or near the telephones in residents #1 and #2's bedrooms.

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.

Emergency service telephone numbers were immediately posted on or near the telephones in residents #1 and #2's apartments. To prevent this violation from occurring again we have added the action of posting the emergency numbers onto our move in checklist for new residents. Upon admission of a new personal care resident the personal care staff will post these numbers in the apartment.

Immediately - The administrator or designated staff person will check all telephones in the home, to include resident telephones, to ensure all emergency numbers as identified under regulation 2600.91 are posted on or near all telephones.

Within 30 days of receipt of the plan of correction, all staff persons will be educated on the requirement of posting emergency telephone numbers on or by each telephone with an outside line in order to facilitate a quick response from the appropriate agency in the event of an emergency, and permits staff and residents the ability to contact the Department to report complaints in privacy.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Dolly Kirk*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Dolly Kirk* Date *9/30/15*

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

The above plan of correction is approved as of 10-20-15
(Date)

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

Plan of correction implementation status as of 10-20-15
(Date)

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

SEP 30 2015

Violation Report: 44657 - 08/18/2015 - Hultquist, Cliff
PCH Name: REGENCY SUITES REGENCY AT SOUTH SHORE

WEST REGION FIELD OFFICE
Human Services Licensing

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

2a. DESCRIPTION OF VIOLATION

The following frozen food items were open and unsealed in the kitchen walk-in freezer:
- 2 lb. package of ground beef
- 1 lb. bag of cookie dough

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 2 lb. package of ground beef and the 1 lb. bag of cookie dough were immediately closed and sealed after being noticed on the date of inspection. To prevent this violation from occurring again we have created a daily checklist that has been posted on the outside of the walk-in freezer. The checklist will be marked off by the food service staff person daily after they have walked into the walk-in freezer to check that all items in the freezer are indeed closed and sealed.

Immediately - A designated staff person will monitor all food storage areas daily to ensure all food is stored in closed or sealed containers. *lsr*

Within 30 days of receipt of the plan of correction, all staff persons involved in food preparation, serving and storage will be educated on the requirement under regulation 2600.103(g) all food shall be stored in closed or sealed containers. *yr*

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Patty Kirik*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *PATY Kirik* Date *9/30/15*

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

The above plan of correction is approved as of <u>10-20-15</u> (Date)	Plan of correction implementation status as of <u>10-20-15</u> (Date)
The above plan of correction was approved by <u>Sme</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>SVP</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44657 - 08/18/2015 - Hultquist, Cliff
 PCH Name: REGENCY SUITES REGENCY AT SOUTH SHORE WEST REGION FIELD OFFICE

1. REGULATION 55 Pa.Code §2600
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION
 There was an approximate 1/4 inch accumulation of lint in the lint trap of the dryer on the second floor laundry room.

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 1/4 inch of accumulated lint in the second floor laundry room was immediately removed on the date of the inspection. To prevent this violation from occurring again we have posted signs and created forms where people can mark off the date, the time, and their name after they have removed the lint from the lint trap and drum after each use of the dryer in each of the laundry rooms. In addition we have created a form that the daily common area housekeeper will use to check each of the laundry room's lint traps and drums to be sure they are completely free from lint each day.

Within 15 days of receipt of the plan of correction, all staff persons will be educated concerning the fire hazard associated with accumulation of lint and the procedures to prevent lint accumulation including emptying lint from the lint trap and drum from clothes dryers after each use.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	03/10/2015	
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Patty Kirik*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Date: 9/30/15

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The above plan of correction was approved by <u>Smp</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>Smp</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

SEP 30 2015

Violation Report: 44657 - 08/18/2015 - Hultquist, Cliff PCH Name: REGENCY SUITES REGENCY AT SOUTH SHORE	WEST REGION FIELD OFFICE Human Services Licensing
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1. REGULATION 55 Pa.Code §2600
 2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION
 The emergency preparedness plan for the municipality was not posted in a conspicuous and public place in the home. It was located in the administrator's office which was locked.

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 emergency preparedness plan for the municipality was immediately posted in a conspicuous and public place on our personal care bulletin board right after the inspection. To prevent this violation from occurring again we have created a monthly checklist that the administrator will use to check that all required publications are posted for the public.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Patty Kirke*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>PATTY KIRKE</i>	Date <i>9/20/15</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>10-20-15</u> (Date) The above plan of correction was approved by <u>SMO</u> (Initials)	Plan of correction implementation status as of <u>10-20-15</u> (Date) <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>SMO</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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