



pennsylvania

DEPARTMENT OF HUMAN SERVICES

Sent via email to: [REDACTED]

MAILING DATE: December 9, 2015

Ms. Dolores L. Smith Sharer, Owner
Smith's Personal Care Home
47 Front Street, P.O. Box 65
Wyalusing, Pennsylvania 18853

RE: Smith's Personal Care Home
License # 238780

Dear Ms. Smith Sharer:

As a result of the Department of Human Services' licensing inspection on September 17, 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,

Michele Moskalczyk

Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 23878 - 08/17/2015 - Yellenic, Cindy
PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

It was discovered on 8-17-15 at 8:30am that Resident #3's Hydrocodone-Acetaminophen 5/325 had been replaced with Acetaminophen 500 and Resident #4's Tramadol had been replaced with Acetaminophen 600. Staff person B, the assistant administrator, determined through staff interviews and staff schedules, who may have diverted the drugs. Staff person B set an appointment for Staff Person A to have a drug test on 8-17-15 and he/she did not go for the testing. Staff Person A was scheduled for work on 8-18-15 and did not show up. Staff person A was terminated from employment as an outcome of the home investigation.

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.

To fix this violation we terminated staff member. Smith's Personal Care Home will be retraining all staff. Smith's Personal Care Home will be having a OAPSA training on December 8, 2015. The training is being put on by local Area Agency on Aging, [redacted] For future, to prevent violation, administrators, [redacted] and Chelsea will be spot checking the narcotics. Administrators will be monitoring the narcotic count's to make sure they correct. Any narcotics missing while counting will be brought to the administrator's attention.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Chelsea Calaman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Chelsea Calaman asst. admin

Date 11/20/15

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

The above plan of correction is approved as of

12/7/15
(Date)

Plan of correction implementation status as of

12/7/15
(Date)

The above plan of correction was approved by

m
(Initials)

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

Violation Report: 23878 - 09/17/2015 - Yellenic, Cindy
PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10226.101-10226.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A, date of hire [redacted] 15, has worked independently since June 22, 2015. Staff Person A's criminal background clearance came back with a prohibitive offense.

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.

To fix this violation, the staff member A was terminated. To prevent this from occurring in the future, when hiring a staff member we won't start the employee until their background check comes back or if hired will be terminated if they have a prohibitive offense.

Administrators, [redacted] and Chelsea Calomen will monitor.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Chelsea Calomen*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Chelsea Calomen asst. admin* Date *11/20/15*

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The above plan of correction is approved as of 12/7/15 (Date)

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

Plan of correction implementation status as of 12/7/15 (Date)

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

Violation Report: 23878 - 09/17/2015 - Yellenic, Cindy
PCH Name: SMITH & PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.52 - Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.6102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A, date of hire [redacted] 15, has worked independently since June 22, 2015. Staff Person A's criminal background clearance came back with a prohibitive offense. Direct Care Staff Person A was retained beyond the 30 day provisional hire period.

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.

to fix this violation, the staff member A was terminated. To prevent this from occurring in the future, when hiring a staff member we won't start the employee until their background check comes back or if hired will be terminated if they have a prohibitive offense.

Administrators, [redacted] and Chelsie Calaman will monitor.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Chelsie Calaman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Chelsie Calaman Asst. Admin.

Date 11/20/15

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(Date)

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12/7/15
(Date)

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[Signature]
(Initials)

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Violation Report: 23878 - 08/17/2015 - Yellenic, Cindy
PCH Name: SMITH S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services. If the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

On 8/26/15, Resident #1 was involved in a physical altercation with Resident #2. The home did not revise the residents assessment identifying the residents behaviors and how the home plans to meet the residents needs.

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.

To fix this violation, there is a plan in place where the assistant administrator, Chelsie Calaman will audit our resident's RASP and assure that all information is correct and accurate. With altercations between residents the home will use diversion tactics for example, take the resident for a walk (or they can walk alone depending on RASP). The tactics would have to correspond to a like for the resident.

Assistant administrator, Chelsie Calaman will continue to audit.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Chelsie Calaman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Chelsie Calaman Asst. Admin

Date 11/20/15

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[Signature]
(Initials)