



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 24 2016

Mr. John F. Bulman, LCSW, Vice President/COO
Milestones Community Healthcare, Inc.
300 Welsh Road Building 4, Suite 100
Horsham, Pennsylvania 19044


RE: Milestone, Inc./626 Easton Road
626 Easton Road
Glenside, Pennsylvania 19038
License #: 128320

Dear Mr. Bulman:

As a result of the Department of Human Services' annual licensing inspection on December 1, 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,


Matthew J. Jones
Director *MSH*

Enclosure
License Inspection Summary

Violation Report: 12832 - 12/01/2015 - McIlvain, Shawn
 PCH Name: MILESTONE INC.

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

On 12/1/15, Resident #1 admitted [redacted] 14 did not have a preadmission screening form completed upon readmission from independent care back to personal care.

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.

All residents will have a preadmission screening completed prior to admission. The change has been made immediately. The Program Director will complete the preadmission screening before each new admission even if it is a readmission. The Assistant Operations Director will check to ensure it has been completed. The Program Director and Assistant Operations Director reviewed the regulation 2600.224a.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Laura Gallagher, Assistant Operations Director</i>	Date <i>12/10/15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/22/15
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

Plan of correction implementation status as of 12/22/15
 (Date)

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