



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE: FEB 29 2016

Ms. Aundrea Leonard, Owner/Partner
Elite Care Group LLP
125 Treymore Court
Pennington, New Jersey 08534

RE: Liza's House
1357 Blue Mountain Drive
Danielsville, Pennsylvania 18038
License #: 214771

Dear Ms. Leonard:

As a result of the Department of Human Services' licensing inspection on January 22, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes), specified on the enclosed Licensing Inspection Summary were found.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct these violations may result in further licensing enforcement action.

Sincerely,

Matthew J. Jones
Director _{/s/}

Enclosure
Licensing Inspection Summary

Violation Report: 21477 - 01/22/2016 - Novak, Ryan
PCH Name: LIZA'S HOUSE

1. REGULATION 55 Pa.Code §2600

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

The licensing inspection summaries dated 7/23/15 & 5/19/15 posted on the bulletin board of the home contained the resident privacy coding documents. The privacy coding documents expose residents confidential information.

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 resident records will be confidential and stored in a manner that protects confidentiality that is consistent with this chapter. Upon receipt of any Violation Report, the Administrator or Designee will review the document and remove any resident or staff privacy coding documents prior to posting.

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)

Date

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

The above plan of correction is approved as of _____
(Date)

Plan of correction implementation status as of _____
(Date)

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

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

Violation Report: 21477 - 01/22/2016 - Novak, Ryan
 PCH Name: LIZA'S HOUSE

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 hired [REDACTED] 15 does not have a high school diploma, GED or active registration status on the Pennsylvania nurse aide registry.

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.

Staff Person A will produce documentation of high school diploma or GED; the administrator will submit such documentation to the Department's Northeast Regional Office for review and approval immediately upon receipt.

The administrator will develop and implement a system that ensures that all newly-hired direct care staff persons produce evidence of high school diploma or GED on or before the first work day.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
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The above plan of correction is approved as of _____ (Date)	Plan of correction implementation status as of _____ (Date)
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Violation Report: 21477 - 01/22/2016 - Novak, Ryan
 PCH Name: LIZA'S HOUSE

1. REGULATION 55 Pa.Code §2600

2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
- (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Direct care staff person B hired [REDACTED] 15, direct care staff person C hired [REDACTED] 15 and direct care staff person A hired [REDACTED] 15 did not receive training in the emergency medical plan.

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 identified staff persons will have all of the training required by this regulation. Documentation of training will be kept in accordance with 2600.65i.

The administrator will develop and implement a system to ensure that all newly-hired staff persons receive the training required by this regulation within 40 scheduled working hours.

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Violation Report: 21477 - 01/22/2016 - Novak, Ryan
PCH Name: LIZA'S HOUSE

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

The fire drill conducted on 9/29/15 at 3:10pm notes 8 residents were present in the home when the alarm sounded and 7 residents were evacuated. 7 residents were actually present in the home when the alarm sounded and 7 resident were evacuated. The fire drill log is incorrectly documented as to the number of residents present in the building at the time of the alarm.

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 home will use the Department's model fire drill log to record fire drill information. The log will be completed in its entirety.

The Administrator will review the home's fire drill log monthly following each fire drill to ensure ongoing compliance.

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