



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: APR 1 1 2016**

Mr. Alex Mains, Administrator  
Penn Assisted Care  
68 Main Street  
Pennsburg, Pennsylvania 18073

RE: Penn Assisted Care  
License #: 139050

Dear Mr. Mains:

As a result of the Department of Public Welfare's licensing inspection on February 16, 2016 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,

A handwritten signature in black ink, appearing to read "Patricia Adams". The signature is fluid and cursive, with a long horizontal stroke at the end.

Patricia Adams  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: PENN ASSISTED CARE		License Number: 13905
Address: 68 MAIN STREET, PENNSBURG, PA 18073		County: Montgomery
Administrator: ALEX MAINS		Region: SOUTHEAST
Legal Entity Name: PENN ASSISTED CARE LLC		
Legal Entity Address: 68 MAIN STREET, PENNSBURG, PA 18073		
Certificate(s) of Occupancy		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 33	Waking Staff: 25
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 02/16/2016: Colon, Lissette		
Off-Site Inspection Dates and Inspectors, if Applicable 02/16/2016: Colon, Lissette		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 33 Number of Residents Served: 33 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 1	<b>Number of Residents who:</b> Receive Supplemental Security Income: 3 Are 60 Years of Age or Older: 14 Have Mental Illness: 16 Have an Intellectual Disability: 2 Have a Mobility Need: 0 Have a Physical Disability: 0	

**Violation Report:**

PCH Name: PENN ASSISTED CARE

**1. REGULATION 55 Pa.Code §2600**

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

**2a. DESCRIPTION OF VIOLATION**

On 2/12/16 through the evening of 2/16/16, the home's heating system was inoperable. The home did not submit an incident report to the Department.

**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 Administrator will monitor the thermostats on a weekly basis for a period of three months and monthly thereafter to make sure the heating system is in working order and in good repair. If the temperature at any time, during or after monitoring, drops below 70 degrees and is expected to last more than two hours the Administrator will submit a reportable incidents and conditions form and report the incident via phone to the Department's regional office immediately.

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Alex Mains, Administrator* Date *3/24/16*

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

The above plan of correction is approved as of <u>4/5/16</u> (Date)	Plan of correction implementation status as of <u>4/5/16</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report:  
PCH Name: PENN ASSISTED CARE

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

On 2/12/16 through the evening of 2/16/16, there were 33 residents in the home. The home's heating system was inoperable. The home neglected to repair the heating system and relocate the residents in a timely manner to ensure the health and safety of the residents during cold weather. The actual temperature in the Pennsburg area during 2/12/16, and the evening of 2/16/16 was the following,

- 2/12/16 - high 23 degrees (day) Lo 7 degrees (night)
- 2/13/16 - high 19 degrees (day) Lo 9 degrees (night)
- 2/14/16 - high 14 degrees (day) Lo 1 degrees (night)
- 2/15/16 - high 28 degrees (day) Lo 10 degrees (night)
- 2/16/16 - high 55 degrees (day) Lo 30 degrees (night) – heating system was repaired

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.*

During the time period of 2/12/16 through 2/16/16 the weather in Pennsburg was unseasonably cold dropping to lows between one and ten degrees. At no point was the home's heating system inoperable, but due to the cold weather was struggling to maintain the temperature between 68 and 72, considering the two degree range permitted in regulation 2600.83a, with the thermostats in two zones of the four total zones dropping to 67 and 65 respectively. The Administrator's understanding of the reportable incidents and conditions at the time was based on the Reportable Incidents and Conditions Appendix A of the Regulatory Compliance Guide: "(18) A termination notice from a utility company. This includes a termination notice or an actual service termination." Ex post facto research into the incident by the Administrator found that regulation 2600.16c does indeed specify "Termination of water or electricity, or termination of heat for any reason resulting in temperatures in any area of the home falling below 70 degrees for more than two hours." The Administrator understands that ignorance of the regulation does not indemnify responsibility and will make every effort to be in compliance with regulation 2600.16c, 2600.42.b, 2600.95, and 2600.107b going forward.

If the temperature on the thermostat in any part of the home drops below 70 degrees the Administrator will arrange for emergency repair of the heating system. If the temperature is expected to fall below 70 degrees for more than two hours the Administrator will submit a reportable incidents and conditions form, report the incident via phone to the Department's regional office immediately, and implement the home's emergency procedures relating to alternate means of meeting resident needs during a utility outage.

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Alex Mains, Administrator* Date *3/21/16*

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The above plan of correction is approved as of 4/5/16  
(Date)

Plan of correction implementation status as of 4/5/16  
(Date)

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

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

Violation Report:

PCH Name: PENN ASSISTED CARE

1. REGULATION 55 Pa.Code §2600

2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION

The home's heating equipment was inoperable on 2/12/16 through the evening of 2/16/16.

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 heating system was repaired on the evening of 2/16/16. The Administrator will arrange for regular maintenance of the heating system. The Administrator will monitor the thermostats on a weekly basis for a period of three months and monthly thereafter to make sure the heating system is in working order and in good repair. If the temperature on the thermostat in any part of the home drops below 70 degrees the Administrator will arrange for emergency repair of the heating system.

*and implement the home's emergency procedures when necessary. @*

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Alex Mains, Administrator* Date *3/21/16*

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(Initials)

**Violation Report:**

**PCH Name:** PENN ASSISTED CARE

**1. REGULATION 55 Pa.Code §2600**

2600.107(b) - The home shall have written emergency procedures that include the following:

- (1) Contact information for each resident's designated person.
- (2) The home's plan to provide the emergency medical information for each resident that ensures confidentiality.
- (3) Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.
- (4) Means of transportation in the event that relocation is required.
- (5) Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.
- (6) Alternate means of meeting resident needs in the event of a utility outage.

**2a. DESCRIPTION OF VIOLATION**

On 2/12/16 through the evening of 2/16/16, the home had no heat. Alternate means of meeting resident needs in the event of a utility outage were not implemented. Residents remained inside the home, in spite of the cold conditions.

**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 Administrator has updated the home's emergency procedures relating to 2600.107b (6) alternate means of meeting resident needs in the event of a utility outage. If the temperature on the thermostat in any part of the home drops below 70 degrees and is expected to last longer than two hours the Administrator will implement the home's emergency procedures relating to alternate means of meeting resident needs during a utility outage. See attached emergency procedures items (16) and (17).

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Alex Mains, Administrator* Date *3/24/16*

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