



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 07 2016

Ms. Wendy Martin, Owner/Administrator
Martin's Care Home, Inc.
522 West Main Street
Rockwood, Pennsylvania 15557

RE: Martin's Care Home
License #: 321540

Dear Ms. Martin:

As a result of the Department of Human Services' annual licensing inspection on March 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 "Jay Bausch".

Jay Bausch
Deputy Secretary

Enclosure
License Inspection Summary

Violation Report: 32154 - 03/16/2016 - Gillespie, Denise
 PCH Name: Martin's Care Home

1. REGULATION 55 Pa.Code §2600
 2600.66(a) - A staff training plan shall be developed annually.

2a. DESCRIPTION OF VIOLATION
 The home does not have a staff training plan for 2016.

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.

See attached Page 2A + 2B of 5 - SE

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Wendy Martin

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

Wendy R. Martin

Date

5/1/16

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

The above plan of correction is approved as of

6-2-16
 (Date)

Plan of correction implementation status as of *6-2-16*
 (Date)

The above plan of correction was approved by

SE
 (Initials)

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

I will develop an annual Staff Training plan each yr. for my staff by referring to 2600.66 of my regulation manual, which will include 2600.65

1. Medication self administration training
2. Instruction on meeting the needs of the residents as described in the preadmission screen form, assessment tool, medical evaluation and support plan
3. Care for residents with dementia and cognitive impairments
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
5. Personal care services needs of the resident.
6. Safe management techniques
7. Care of residents with mental illness or mental retardation, or both if the population is served in the home
8. Fire safety completed by a fire safety expert or by a staff trained by a fire safety expert

over

9. Emergency preparedness procedure
and recognition and response to
crises and emergency situations

Page 2 B of 5

gr

10 resident rights

11 the older adult protective services
Act

12 Falls and accident prevention

13. New population groups that are
being served at the home that
were not previously served if
applicable

I will have each staff person do
a staff training which will include
all 13 items listed each year.

I will then go over these trainings
with each staff person and have
them sign off on them, and I will
sign the training as well to ensure
they are done by all staff.

Wendy Martin
5/1/06

Violation Report: 32154 - 03/16/2016 - Gillespie, Denise

PCH Name: Martin's Care Home

1. REGULATION 55 Pa.Code §2600

2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION

The last fire safety inspection and drill observed by a fire safety expert was conducted on 03/08/2014.

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.

I will do my best to have a fire safety expert from my local fire department do an annual fire drill with myself and my staff and my residents each yr. I will have the fire safety expert sign the appropriate papers. Keep them on file, & the administrator Wendy Martin will have this done each yr.

I am also sending a copy of my fire safety inspection, I was lucky able to get the fire chief to my home!
3/23/16.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Wendy Martin

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

Wendy A. MARTIN

Date

5/1/16

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(Initials)

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Violation Report: 32154 - 03/16/2016 - Gillespie, Denise
 PCH Name: Martin's Care Home

1. REGULATION 55 Pa.Code §2600

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION

The home does not have a safe evacuation time from a fire safety expert for 2015. The home's fire drill evacuation times that exceeded 2 1/2 minutes included the following:

- 05/29/2015 - 3 minutes
- 09/13/2015 - 2 minutes and 35 seconds
- 10/30/2015 - 3 minutes
- 12/09/2015 - 2 minutes and 50 seconds
- 01/08/2016 - 2 minutes and 45 seconds

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.

I will work to ensure my fire drill times are 2 min 30 sec or less. I will work with my staff and my residents to evacuate the PCH in 2 min 30 sec or less.

Fire safety expert determined safe evacuation time of 3 minutes on 3/23/16. -SE

Repeat Violation: No

Date(s) of Previous Violation(s)

Signature of Legal Entity Representative
 (Required on EVERY Page)

Wendy A. Martin

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

Wendy A. MARTIN

Date

5/1/16

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Violation Report: 32154 - 03/16/2016 - Gillespie, Denise
 PCH Name: Martin's Care Home

1. REGULATION 55 Pa.Code §2600

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION

According to the home's fire drill log, only 15 of the 16 residents in the home evacuated to the fire safe area during the fire drill on 09/13/2015.

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.

I will be sure to evacuate all residents for each fire drill who are in the personal care home at the time of the fire drill, we will evacuate in a timely fashion in 2 min 30 sec and under. Fire safety experts recommended evacuation time of 3 minutes on 3/23/16.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Wendy Martin*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Wendy A Martin* Date *5/1/16*

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The above plan of correction is approved as of 6-2-16 (Date)

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

Plan of correction implementation status as of 6-2-16 (Date)

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