



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mr. G. Bryan Oros, Executive Director
St. Paul Homes, Inc.
339 East Jamestown Road
Greenville, Pennsylvania 16125

RE: The Ridgewood at St. Paul Homes
License #: 467480

Dear Mr. Oros:

As a result of the Department of Human Services' annual licensing inspection on May 13, 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 "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: THE RIDGEWOOD AT ST PAUL HOMES		License Number: 46748
Address: 339 EAST JAMESTOWN ROAD, GREENVILLE, PA 16125		County: Mercer
Administrator: Teresa Luciani		Region: WEST
Legal Entity Name: ST PAUL HOMES INC		RECEIVED
Legal Entity Address: 339 EAST JAMESTOWN ROAD, GREENVILLE, PA 16125		
Certificate(s) of Occupancy C-2 LP 04/07/1995 PA Labor & Industry		WEST PAUNJUN FIELD OFFICE Number: 303-604-1000
Staffing Hours		
Resident Support: 0	Total Daily Staff: 26	Waking Staff: 20
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
05/13/2016: Knee, Donald; Pfaff, Vicki		
Off-Site Inspection Dates and Inspectors, if Applicable		
05/18/2016: Knee, Donald		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 52 Number of Residents Served: 25 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: 0 Number of Hospice Residents in past year: 2		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 25 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 1 Have a Physical Disability: 0

Violation Report: 46748 - 05/13/2016 - Knee, Donald
PCH Name: THE RIDGEWOOD AT ST PAUL HOMES

WEST REGION FIELD OFFICE
(Human Services Licensing)

1. REGULATION 55 Pa.Code §2600

2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

2a. DESCRIPTION OF VIOLATION

On 5/13/16, then home's cat "Murphy" was present in the home; however, there is no current certificate of rabies vaccination.

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.

1.) Feline, "Murphy" was vaccinated 5/17/16.
(see attachments A+B)

2.) Feline "Murphy" + other animals on premises will be current with vaccinations.

3.) All records will be maintained in Administrator's office.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Teresa Luciani*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Teresa Luciani Administrator* Date *7/25/16*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE

The above plan of correction is approved as of 7/25/16
(Date)

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

Plan of correction Implementation status as of 7/25/16
(Date)
 Fully Implemented
 Partially Implemented - Adequate Progress *SUP*
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 46748 - 05/13/2016 - Knae, Donald		WEST REGION FIELD OFFICE (Number Between Licensing)	
PCH Name: THE RIDGEWOOD AT ST PAUL HOMES			
1. REGULATION 55 Pa.Code §2600 2600.131(f) - Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.			
2a. DESCRIPTION OF VIOLATION The fire extinguisher located in the activities area of Harmony Hall has not been inspected by a fire safety expert since June of 2013.			
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.			
1.) A serviced Fire extinguisher was added May 13th. (See attachment C+D)			
2.) All Fire extinguishers are inspected monthly by maintenance staff & annually by Fire extinguisher vendor.			
Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Teresa Luciani</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Teresa Luciani Administrator</i>			Date <i>7/25/16</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of <u>7/25/16</u> (Date)		Plan of correction implementation status as of <u>7/25/16</u> (Date)	
The above plan of correction was approved by <u>SLP</u> (Initials)		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>SLP</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	