



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to ELITE CARE GROUP LLP
LEGAL ENTITY

To operate LIZA'S HOUSE
NAME OF FACILITY OR AGENCY

Located at 1357 BLUE MOUNTAIN DRIVE, DANIELSVILLE, PA 18038
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 20
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from September 2, 2016 until September 2, 2017,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 214770

Robert E. Robinson
ISSUING OFFICER

Jay Bank
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 02 2016

Ms. Audrea 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 #: 214770

Dear Ms. Leonard:

As a result of the Department of Human Services' licensing inspection on June 23, 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosures
License
License Inspection Summary

Violation Report: 21477 - 06/23/2016 - Dumas, Gerald
 PCH Name: LIZA'S HOUSE

1. REGULATION 55 Pa.Code §2600

2600.44(c) - If a resident indicates that he wishes to make a written complaint, but needs assistance in reducing the complaint to writing, the home shall assist the resident in writing the complaint.

2a. DESCRIPTION OF VIOLATION

The home's resident contracts does state that residents have the right to file a formal complaint but did not address the procedure and state how the facility would assist a resident with filing a complaint.

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 next page please

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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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)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 21477 - 06/23/2016 - Dumas,
Gerald

PCH Name: LIZA'S HOUSE

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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.

Why is the regulation important?

The regulation secures that a resident with personal care needs has the necessary assistance to document complaints in writing.

How was the regulation violated?

Even though Liza's House resident contract did state that residents have the right to file a formal complaint, it did not address the procedure and state how the facility would assist a resident with filing out a formal complaint.

What caused the violation?

The resident contract did not state that the resident has the right to file a formal complaint with any individual or agency and recommend changes in policies, home rules and services of the home without intimidation, retaliation or threat of discharge.

What can be done right away to fix the violation?

The resident's contract that the home received the violation for is no longer a resident at Liza's House. However, the formal complaint procedure and how the home will assist will be added to all new resident contracts. Previous contracts will be reviewed and the complaint procedure will be added to all resident contracts.

What can we do to prevent future violations?

To prevent future violations Liza's House will include an addendum with the formal complaint procedure and state how the facility will assist residents with filing a formal complaint.

Who will be responsible for preventing future violations?

The Administrator will review all contracts prior to an admission; an annual audit will be conducted as well. If the administrator is not in the home during the admission then the designated person will be the responsible.

AG 8/20/16

Violation Report: 21477 - 06/23/2016 - Dumas, Gerald
PCH Name: LIZA'S HOUSE

1. REGULATION 56 Pa.Code §2600
2600.65(a) - Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.

2a. DESCRIPTION OF VIOLATION
Direct Care Staff Person A received 7 of the required 12 hours of annual training in the 2015 training year.

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.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Andrea Leonard*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Andrea Leonard* Date *8/24/16*

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The above plan of correction is approved as of 8/24/16
(Date)

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

Plan of correction implementation status as of 8/24/16
(Date)

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

Violation Report: 21477 - 08/23/2016 - Dumas, Gerald
PCN Name: LIZA'S HOUSE

Page 3 of 5

1. REGULATION 55 Pa.Code §2800

2600.05(e) - Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A received 7 of the required 12 hours of annual training in the 2015 training year.

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.

Why is the regulation important?

The regulation is important because it ensures that the direct care staff person is receiving high quality training to continue to develop their knowledge of regulatory requirement and the best practices in resident care.

How was the regulation violated?

The direct care staff person has been with the home since 2006 and is a Registered Nurse. We believe that the staff person did have the required 12 hours of training but the documentation was taken or misplaced by previous administration. The violation occurred because there were only 7 hours of training that showed proper documentation when 12 hours required.

What caused the violation?

The violation was caused because only 7 out of the 12 hours showed proper documentation. It is important for direct staff persons to receive his or her quality of training for the resident care and to develop their knowledge of regulatory requirements.

What can be done right away to fix the violation?

The direct care staff person who is a RN will be retrained and review the remaining 7 hours of training and sign the proper documentation.

What can we do to prevent future violations?

As of January of 2016 an annual staff training (calendar year) book was put into place that contains all the staff training and the proper documentation. In this book there is an employee/instructor signature sheet, record of training sheet, and the training source section. This training book was provided to the Inspector during the survey.

Who will be responsible for preventing future violations?

The Administrator will be responsible for the annual staff training and monthly audits will be conducted as well. If the administrator is not in the home during the staff training then the designated person will be the responsible.

Audrey Leonard
af

af
8/24/16

Violation Report: 21477 - 06/23/2016 - Dumas, Gerald
PCH Name: LIZA'S HOUSE

1. REGULATION 55 Pa. Code §2600
2600.65(9) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:
 (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
 (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
 (3) Resident rights.
 (4) The Older Adult Protective Services Act (35 P. S. §§10225.101-10225.5102).
 (5) Falls and accident prevention.
 (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION
Direct Care Staff Person A (Date of Hire [redacted]/06), did not receive the required annual training in the following topics: fall and accident prevention or in Older Adult Protective Services Act.

Why is the regulation important?
The regulation is important because it ensures that all staff who work in the home are reminded of the home's emergency procedures and mandated reporting requirements.

How was the regulation violated?
The direct care staff person has been with the home since 2006 and is a Registered Nurse. We believe that the staff person did have the required 12 hours of training but the documentation was taken or misplaced by previous administration. The violation occurred because we were not able to show documentation that the training did occur in these certain training topics.
Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
 (1) Emergency preparedness procedures & recognition and response to crises and emergency situations.
 (2) Resident rights.
 (3) The Older Adult Protective Services Act (35 P. S. §§10225.101-10225.5102).
 (4) Falls and accident prevention.

What caused the violation?
The violation was caused because only 7 out of the 12 hours of training showed proper documentation. It is important for direct staff persons receives their quality of training for the resident care and to develop their knowledge of regulatory requirements.

What can be done right away to fix the violation?
The direct care staff person will be retrained and review the homes emergency procedures and mandated reporting requirements. And ensure that the direct care staff person receives the necessary training to successfully provide essential resident care services.

What can we do to prevent future violations?
January of 2016 an annual staff training (calendar year) book was put into place to contain all the staff training and the proper documentation. In this book there is an employee/instructor signature sheet, record of training sheet, and the training source. The training book will be reviewed monthly to make sure all staff is receiving their proper training.

Who will be responsible for preventing future violations?
The Administrator will be responsible for the annual staff training and monthly audits will be conducted as well. If the administrator is not in the home during the staff training then the designated person will be responsible.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jessie Robbins, Administrator</i>	Date <i>8/12/16</i>
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The above plan of correction is approved as of <u>8/20/16</u> (Date)	Plan of correction implementation status as of <u>8/20/16</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (Initials)	<input type="radio"/> Fully Implemented <input checked="" type="radio"/> Partially Implemented - Adequate Progress <input type="radio"/> Partially Implemented - Inadequate Progress <input type="radio"/> Not Implemented

Violation Report: 21477 - 06/23/2016 - Dumas, Gerald
PCH Name: LIZA'S HOUSE

1. REGULATION 55 Pa.Code §2600
2600.141 (a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION
Resident #1's DME dated 07-27-15 did not have his/her immunizations information completed in section # 6.

3. PLAN OF CORRECTION (POC) (Aach 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.

Why is the regulation important?
A resident accurate medical information helps the home decide whether or not their needs can be met at the home. The regulation also helps the home develop an accurate assessments and support plan. It is important because the regulation ensures that the home is able the meet the medical needs of the resident.

How was the regulation violated?
The regulation was violated because the DME was not filled out properly. The immunizations portion of the DME was left blank.

What caused the violation?
The regulation was violated because the DME was not filled out properly. The doctor did fill out the DME but the immunization portion was not filled out leaving that portion blank. It was reviewed by the doctor but left blank due to being unknown.

What can be done right away to fix the violation?
The resident's annual DME was just completed and fill out completely by the Administrator and Doctor to complete/review/add information and sign by doctor. All portion of the DME were filled out. If a portion was unknown such as immunization then a line will be put in that portion or n/a to ensure that the doctor did reviewed it.

What can we do to prevent future violations?
The administrator, except for the medical professional information section, can complete DME's prior to the In-person evaluation. The Administrator will make sure that all the areas of the DME are completed.

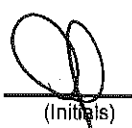
Who will be responsible for preventing future violations?
The Administrator will be responsible for completing and reviewing the DME prior to the medical professional information portion. If the Administrator is not present during the time of completing the DME then the designated person will be responsible.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Jessica Robbins (Goli)*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Jessica Robbins, Administrator* | Date *8/12/16*

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