



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]  
Mailing Date: October 3, 2016

Ms. Annette Chickey, Administrator  
UMH PA Corp  
209 Roberts Road  
Pittston, Pennsylvania 18640

RE: Wesley Village  
215 Roberts Road  
Pittston, Pennsylvania 18640  
License # 241880

Dear Ms. Chickey:

As a result of the Department of Human Services' licensing inspection on June 28, 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,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 24188 - 06/28/2016 - Dumas, Gerald  
 PCH Name: WESLEY VILLAGE

1. REGULATION 55 Pa. Code §2600

2600.130(g) - If a smoke detector or fire alarm becomes inoperative, repair shall be completed within 48 hours of the time the detector or alarm was found to be inoperative.

2a. DESCRIPTION OF VIOLATION

The home's fire annunciator panel, located in the Anderson Nursing Station, indicated "trouble." It could not be determined if the system was fully operational. The Home's Administrator stated that the system had been down for some time. The Plant Operations Director indicated that the Annunciator panel will continue to show trouble until August as construction was occurring in another part of the campus. Neither representative of the home could assure the licensing rep that the system will perform as required in the event of an actual emergency.

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 Attachment # 1 "

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Sharon Pitsick RN*

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

SHARON PITSIK RN

Date 9/23/2016

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

The above plan of correction is approved as of

*9/29/16*  
 (Date)

Plan of correction implementation status as of

*9/29/16*  
 (Date)

The above plan of correction was approved by

*[Signature]*  
 (Initials)

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

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ATTACHMENT #1

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Regulation: 2600.130(g)

Plan of Correction:

As Administrator of the Wesley Village Personal Care facility, I respectfully disagree with the submission of this violation and the information provided by the Department Representative, as the description of the violation, is inaccurate.

To assure regulatory compliance with this violation report received, the information of the actual events which occurred upon the Department Representatives question of the inoperable fire alarm system, which occurred initially on June 28, 2016, is being provided, in addition to the letters, and memo's provided to the Representative to verify the system has been operational, and has not compromised the safety and well-being of the residents in the facility at any time, or on any occasion, as stated by the violation and description of the violation. A plan of corrections will be included to assure the on-going proper functioning of the system as per our facility policy and procedures in place, however, a plan of corrections cannot be provided directly related to the violation, since the violation in question, never occurred, and the system was never non-operational as stated. To provide a rebuttal to the violation in question, the fire alarm system was never inoperable, and repair was not needed because the system was operational and functioning at 100%. The Homes Administrator never stated the system was "down for some time". Both the Administrator and the Plant Operations Director, attempted numerous times to assure the Representative that the system was functioning, and would, and has, performed as required, without any disruption of service to the facility. It is assumed that this Representative did not fully understand the system, how it functions, and the information and evidence provided to him to verify that the system is indeed functioning properly, and is performing as intended. The Home did not receive any calls or other means of communication from any other persons in the Department, requesting information, or clarification, of this situation which could not be resolved.

During the course of the investigation of the inoperability of the facilities fire alarm system, which began on June 28, 2016, the Representative has not demonstrated, or has had the ability to provide evidence, that the system is, or has been, inoperable, as he states in this violation.

The Department Representatives question of the inoperability of the fire alarm system began on June 28, 2016, when the Representative visited the facility for

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an investigation of a reportable incident sent to the department, and required verification of events that occurred during this incident, due to manner of how it was written by the staff nurse, which lacked some details, which were resolved during the visit. There was no further follow up from this investigation, or other communication by the Department in regards to this incident. However, during the visit, the representative noted a "TROUBLE" signage on the fire panel in the nurses office. The Representatives question then began on the inoperability of the fire alarm system in the facility due to this "TROUBLE" on the panel. Both the Administrator and the Plant Operations Director [REDACTED] spoke with the Representative on that evening to inform, explain, and assist in providing verification that the system was indeed operational, had been utilized during routine fire drills, and also had verification from the alarm company, Easter Time, although the "TROUBLE" was noted on the panel, the system was, and will continue to fully operate correctly. Easter Time has the ability to notify the facility, if, and when, a fire alarm system, for any reason, does not operate as it should, as the company has the operational ability to immediately provide this information to the facility, due to the sophistication of the system in place. It was explained that the "TROUBLE" noted on the fire panel was due to the on-going construction occurring in the skilled nursing building on the campus, and would be resolved upon the completion of the renovation.

The Administrator and the Plant Operations Director had cooperated fully with the Department Representatives numerous request, over the past 60+ days, to provide the necessary information to support evidence that the fire alarm system is functioning properly, is fully operational, the TROUBLE signage is not impeding the function or accuracy of the fire alarm system, and the residents, staff, and visitors safety and well-being is not compromised by having an inoperable fire alarm system.

In addition to numerous phone conversation between the Plant Operations Director, and the Department Representative, several written correspondences were sent to the representative over the past two months, per his request, to again, verify the information the facility was providing to him, and the functioning of the fire alarm system.

ATTACHMENT# 2: Initial memo written by the Administrator on June 28, 2016, per the request of the Department Representative during his visit for an unrelated incident. The Representative stated he was not leaving the building until he received something in writing, stating the conversation he had with the Plant Operations Director on the telephone. The Administrator hand wrote the information, and was required to sign it, in addition to the nurse on duty, and the maintenance staff who was present at the time.

ATTACHMENT #3: Memo received from Eastern Time in regards the functioning of the fire alarm system in the facility. Dated August 9, 2016

  
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Sean P. [Signature]  
9/22/16  
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ATTACHMENT #4: Email sent to the department dated August 12, 2016, regarding the C.O.P.S. Monitoring System and the proper function and operation of the fire alarm system.

ATTACHMENT #5: Email sent to Department Representative, dated August 26, 2016. The representative called the Administrator on this date, who was out of the office, and then spoke with the Administrative Assistant. [Redacted] spoke with the Representative and was then informed to call the Plant Operations Director to come to her office, and speak with the Department Representative on the telephone. The Plant Operations Director came to the office, spoke with the Representative, and then the Representative spoke with the Administrative Assistant again. He informed her that she was to sign her name to the email notification that the Plant Operations Director was sending him, and to verify that she spoke to him on that date.

ATTACHMENT #6: Copy of the facility fire drill log for the past several months. As indicated on the department approved form, the fire alarm system was activated for the fire drills, and the system was working properly.

The Home does contract with a fire safety expert, [Redacted] from Fire & Life Safety. This Departments concern was also discussed with our fire safety expert during a visit with him in July 2016, in which he conducted a scheduled fire drill. The drill conducted included pulling of the alarm, as per usual protocol for all fire drills conducted in the home. The system was functioning properly, as previous drills conducted, with our fire safety expert present during the drill, evaluating all aspects of the drill including proper staff action, resident evacuation, and fire alarm system function. Understanding of the homes fire alarm system, as well as an understanding of many alarm systems, as a fire safety expert, [Redacted] also verified that the homes fire system was functioning properly, regardless of the "TROUBLE" indicator on the panel, understanding it was temporary, would resolve upon completion of the renovations, and did not, and would not, interrupt proper service of the system, and certainly not place the residents, staff, or visitors of the facility in harms way, due to a malfunctioned system.

The Administrator will continue to work closely with the Plant Operations Director to assure the fire system in place will continue to function properly, be serviced as contracted, and work with Eastern Time in the event of any malfunctions, as the facility will be informed immediately to have repairs done, and place alternate safety procedures in place until completed. Complete scheduled monthly fire drills, with the system being activated to assure proper function, with proper documentation to substantiate this, and utilize the services of our fire safety expert in completing fire drills, education of staff and residents,

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and assisting the facility in maintaining the highest quality of service to our residents, ensuring their safety and well-being is always priority for the home, and its Administration.

Susan Pittsui RN  
9/23/2016

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