



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

MAY 18 2017

Ms. Melissa Roell,  
Administrator  
Ruth M. Smith Center  
Building B  
P.O. Box 576, 407 South Main Street  
Sheffield, Pennsylvania 16347

RE: Ruth M. Smith Center  
License #: 445960

Dear Ms. Roell:

As a result of the Department of Human Services' annual licensing inspections on January 4, 2017 and January 5, 2017, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

Jacqueline L. Rowe  
Director

Enclosure  
Licensing Inspection Summary



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Violation Report: 44598 - 01/04/2017 - Cutter, Jan  
 PCH Name: RUTH M SMITH CENTER

WEST REGION FIELD OFFICE  
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600  
 2600.26(a) - The home shall establish and implement a quality management plan.

2a. DESCRIPTION OF VIOLATION

The home has not established and implemented a quality management plan to include the review of:

- (1). The reportable incident and condition reporting procedures.
- (2). Complaint procedures.
- (3). Staff person training.
- (4). Licensing violations and plans of correction, if applicable.
- (5). Residents or family councils, or both, if applicable.

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.*

Immediately - The administrator will establish a quality management plan and implement it. Said administrator will also add this to the policy and procedure handbook for staff.

In the future the administrator will check regulation policies with home policies to ensure compliance.

The home has established & implemented a quality management plan. *JW.*  
 3/24/17

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*JM Melara JM Wheeler*

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

Date  
 2/10/17

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

The above plan of correction is approved as of 3/24/17  
 (Date)

Plan of correction implementation status as of 3/24/17  
 (Date)

- Fully Implemented *JW.*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *JW.*  
 (Initials)

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Violation Report: 44586 - 01/04/2017 - Cutter, Jan		WEST REGION FIELD OFFICE	
PCH Name: RUTH M SMITH CENTER		Human Services Licensing	
<p>1. REGULATION 55 Pa.Code §2600                  2600.264(b) - Each home shall develop and implement policy and procedures addressing record accessibility, security, storage, authorized use and release and who is responsible for the records.</p>			
<p>2a. DESCRIPTION OF VIOLATION                  The home has not developed and implemented policy and procedures addressing record accessibility, security, storage, authorized use and release and who is responsible for the records.</p>			
<p>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.</p> <p>Immediately - The administrator will establish a policy and procedure addressing record accessibility, security, storage, authorized use and release and who is responsible for the records. Also the policy and procedure will be placed in the homes policy and procedure handbook for staff.</p> <p>In the future the administrator will check regulation policies with home policies to ensure compliance annually.</p> <p>The home's policy addressing records has been developed + implemented. <i>M.</i>                  3/24/17</p>			
Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) <i>Melissa M Boell</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa M Boell Administrator</i>			Date <i>2/10/17</i>
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>			
The above plan of correction is approved as of <u>3/24/17</u> (Date)		Plan of correction implementation status as of <u>3/24/17</u> (Date)	
The above plan of correction was approved by <i>M.</i> (Initials)		<input checked="" type="checkbox"/> Fully Implemented <i>M.</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	