



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

APR 06 2017

Mr. Jeffrey S. Truhan,  
CEO/Administrator  
The Shook Home  
55 South Second Street  
Chambersburg, Pennsylvania 17201

RE: Quarters at the Shook  
License #: 355540

Dear Mr. Truhan:

As a result of the Department of Human Services' annual licensing inspection on January 6, 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,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
Licensing Inspection Summary



Violation Report: 36554 - 01/06/2017 - McCloskey, Jason  
 PCH Name: QUARTERS AT THE SHOOK

1. REGULATION 55 Pa. Code §2600  
 2600.130(a) - There shall be an operable automatic smoke detector located within 15 feet of each bedroom door.

2a. DESCRIPTION OF VIOLATION

The nearest operable smoke detector to resident bedroom 2D62 is 20 feet away.  
 The nearest operable smoke detector to resident bedroom 3D60 is 21 feet 8 inches away.  
 The nearest operable smoke detector to resident bedroom 3D62 is 16 feet 8 inches away.

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 pages -  
 Page 2A of 2

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

Signature of Legal Entity Representative (Required on EVERY Page) *Lehoma Theimer* u PCHA

|   |                       |
|---|-----------------------|
| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Lehoma Theimer LAN PCHA</i> | Date <i>1-27-2017</i> |
|---|-----------------------|

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

The above plan of correction is approved as of 2/1/17  
 (Date)

Plan of correction implementation status as of 2/1/17  
 (Date)

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

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

Page 2A of 2

## **The Quarters at The Shook Home**

### **Violation Report 355540**

#### **Plan of Correction**

##### **Regulation 55 Pa. Code 2600.130(b)**

- 1. The Personal Care Home Administrator will conduct an audit of all hallway smoke detectors to ensure compliance with 55 Pa. Code Chapter 2600.130(a) by January 12, 2017 (see attached, exhibit A1 and A2).**
- 2. Underwriters Laboratories Interconnected smoke detectors have been placed in the hallway within 15 feet of bedroom doors for rooms 2060, 2062, 3060 and 3062 on January 20<sup>th</sup> 2017 to ensure compliance with 55 Pa. Code Chapter 2600.130(a) and 55 Pa. Code Chapter 2600.130(c) (see attached installation instructions, exhibit B1 and B2).**
- 3. The Personal Care Home Administrator will educate all direct care staff on the Violation Report and subsequent Plan of Correction at the regularly scheduled staff meeting on February 8, 2017.**
- 4. The Personal Care Home Administrator will audit all monthly test logs to ensure compliance with 55 Pa. Code Chapter 2600.130(f) and 55 Pa. Code Chapter 2600.130(g).**
- 5. The Personal Care Home Administrator will report the results of the audits to the Quality Assurance/Performance Committee monthly starting February 28, 2017, to ensure completion of the testing. The audits will continue until no longer deemed necessary by the Committee.**