



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: March 1, 2017

Mr. Jeff Naden
President
Nasun, Inc.
1575 Grand Boulevard
Monessen, Pennsylvania 15062

RE: Hallsworth House
#428970

Dear Mr. Naden:

As a result of the Department of Human Services' licensing inspection on January 18, 2017, 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 that reads "Larry Mazza".

Larry Mazza
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 42897 - 01/18/2017 - Garrigan, Laurie
 PCH Name: HALLSWORTH HOUSE

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1. REGULATION 55 Pa.Code §2800
 2800.141(b)(1) - A resident shall have a medical evaluation at least annually.

FEB 03 2017

2a. DESCRIPTION OF VIOLATION

WEST REGION FIELD OFFICE
 Human Services Licensing

Resident #1's most recent medical evaluation was completed on 10/21/15.

Resident #2's most recent medical evaluation was completed on 2/6/15.

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.

Resident #1 had a medical evaluation completed on 8/11/16. ← 2/17/17

Resident #1 - A new RASP was completed on 1/20/17. A new DME is still on the desk of the residents physician waiting for him to complete it (as of this date)

Resident #2 was a Hospice Resident who was declining and unfortunately passed away later that day of [redacted] 2017 and as such are not able to remedy the paperwork error.

For Future, all residents RASPs and DMEs have been put on two separate calendar schedules with two different staff persons in order to facilitate a "checks and balances" set up to prevent any paperwork from being accidently missed and accidently missing the 365 day window of annual completion.

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
Jeffrey Naden, administrator	2/2/17

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

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

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

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

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

Violation Report: 42897 - 01/18/2017 - Garrigan, Laurie
 PCH Name: HALLSWORTH HOUSE

1. REGULATION 55 Pa.Code §2600
 2600.225(c) - The resident shall have additional assessments as follows:
 (1) Annually.
 (2) If the condition of the resident significantly changes prior to the annual assessment.
 (3) At the request of the Department upon cause to believe that an update is required.

RECEIVED

2a. DESCRIPTION OF VIOLATION
 Resident #1's most recent assessment was completed on 11/17/16.
 Resident #2's most recent assessment was completed on 2/16/16.

FEB 08 2017
 WEST REGION FIELD OFFICE
 Human Services Licensing

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.

An assessment was completed for resident #1 on 1/20/17. P 2/17/17

Resident # 1 A new RASP was completed on 1/20/17. A new DME is still on the physicians desk awaiting a signature and completion.

Resident # 2 Resident was a Hospice resident who had been declining of late unfortunately passed away later that same day of [redacted] 17

For the future we have instituted a set up where all DMEs and RASPs have been put on two separate calendar schedules with two different staff in order to facilitate a "checks and balances" set up to prevent any future paperwork from missing their respective annual completion dates.

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