



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAILING DATE: March 27, 2017

Mr. Terushia Jackson, Administrator
Rebecca's Personal Care Home, Inc.
118 Masters Avenue
Everett, Pennsylvania 15537

RE: Rebecca's at Everett
License #: 324070

Dear Ms. Jackson:

As a result of the Department of Human Services' licensing inspection on February 8, 2017, 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,

A handwritten signature in black ink, appearing to read "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA SAT EVERETT

1. REGULATION 55 Pa.Code §2600

2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION

The licensing inspection summary for the annual inspection conducted on February 25, 2016 was not posted in a conspicuous and public place in the the home.

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.

The current license and copy of the most current inspection was posted on our bulletin in the entryway of the home. To prevent this from occurring again, I will post the inspection summary as soon as it is received. The inspection date will be highlighted. During monthly staff meetings an inspection the bulletin will be done to make sure all necessary notices, policies, and forms are current and in good repair.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

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

Date 2/25/17

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

The above plan of correction is approved as of 3/27/17
(Date)

Plan of correction implementation status as of 3/27/17
(Date)

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

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

Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On January 31, 2017, an allegation of abuse upon Resident 1 was made to the home. The home did not report this allegation of abuse to the local Area Agency on Aging.

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.

The allegation of abuse was not brought to me on the 31st of January. The home was not notified until February 2nd 2016. We were notified by the local Area Agency on Aging that there was an allegation put against one of our employees. The agent from AAA was [redacted]. Therefore I didn't submit a report, because Area on Aging was the agency that notified us.

In the future, even if we are notified of an allegation by Area Agency on Aging, I will submit a report to them along with a report to the regional office. I am including the form I filled out on the 2nd of Feb. I sent it to the agency the date of the inspection.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

[Handwritten Signature]

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

Lerushia Jackson

Date

2/25/17

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3/27/17
(Date)

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3/27/17
(Date)

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[Handwritten Initials]
(Initials)

Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S. AT EVERETT

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On January 31, 2017, an allegation of abuse upon Resident 1 was made to the home. The home did not submit an incident report to the Department regarding this allegation of abuse.

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.

To correct the above violation a report was submitted to the Department regarding this allegation of abuse on 2/6/17.

To prevent a similar violation I will be submitting a report within 24 Hours of an incident

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

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Terushia Jackson, Administrator Date 2/25/17

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Plan of correction Implementation status as of 3/27/17 (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: 32407 - 02/08/2017 - Showers, Michael

PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

On 1/31/2017, Staff Person A yelled at Resident 1 due to the the resident needing assistance after urinating in his/her pants. An investigation into the matter found that Staff Person A frequently yells at Resident 1 when needing Incontinence care and blames the resident for soiling the clothing intentionally. The actions of Staff Person A have caused Resident 1 emotional concerns and fear of the staff person.

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.

To correct the violation listed above, it was determined after interviewing the resident 1 and speaking with [redacted] guardian [redacted] that Staff Person A would be terminated from her position as direct care aide. Staff Person A was released of her duties on [redacted]/17.

To prevent this from happening again, we will perform extra trainings on resident rights, definition of abuse and neglect, and exercises of caregiver stress.

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

Signature of Legal Entity Representative (Required on EVERY Page) [Signature]

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Verushia Jackson Date 2/25/17

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Partially Implemented - Inadequate Progress
Not Implemented

Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S. AT EVERETT

1. REGULATION 55 Pa. Code §2600

2600.42(e) - A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

2a. DESCRIPTION OF VIOLATION

Three security cameras are located in the home that are recording areas where residents are present. These cameras are recording the dining room, the Ritchey Hallway (including numerous bedroom door entrances) and the lounge area (including numerous bedroom door entrances).

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.

To correct the violation listed above we have stopped recording all areas where residents are present. The cameras are only used for monitoring.

The cameras will no longer record and will only be used for monitoring in the future.

Repeat Violation: No

Date(s) of Previous Violation(s):

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

Date 2/25/17

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(Initials)

Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa.Code §2600
2600.85(e) - Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION
On 2/8/17, the lid to the outside dumpster was not closed, leaving the trash uncovered.

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.

To correct this violation nightshift has been notified to close the lid of dumpster after taking out the garbage. A memo was sent out to all employees letting them know that a trash receptacle without a lid is a violation. Notifying All staff in hopes that if everyone is aware we can work together to keep this from occurring again.

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

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(Initials)

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Violation Report: 32487 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S. AT EVERETT

1. REGULATION 55 Pa. Code §2600
2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The vinyl flooring located in the dining area has numerous tears taped over with duct tape and in some areas is peeling up. This creates an uneven surface and a tripping hazard for residents with mobility devices.

The concrete at the outdoor patio has a trench leading to a water drain in it. The trench is approximately six feet long and tapers from a width of one inch to five inches. This trench creates a tripping hazard for residents.

The emergency door located in the hallway near bedroom 16 is significantly rusted at the bottom and missing three inches of the door material. The home was using a blue incontinence pad to stop the airflow under the door.

The laundry room ceiling has eight suspended tiles with heavy water damage as evidenced by sagging and brown/black discoloration. There is a hole in one of these tiles.

The ceiling in the Ritchey Hallway is missing a ceiling tile outside of bedroom R2 and Beauty Shop.

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.

- * The vinyl flooring has been taken up. A photo is attached to the email. The flooring will be put in its place around June 15th.
- * The concrete at the outdoor patio will be filled in with concrete in May 2017. Due to inclement weather we are unable to keep the new concrete from cracking.
- * The emergency door by bedroom 16 will be replaced in June along with the other repairs.
- * The Laundry room ceiling tiles are replaced. We ordered extra tiles in case others are damaged in the future.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	02/25/2016	
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Signature of Legal Entity Representative
(Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Terushia Jackson</i>	Date <i>3/15/17</i>
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(Date)

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

Plan of correction implementation status as of 3/27/17
(Date)

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Violation Report 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa.Code §2608
2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION

The emergency door located near Room 16 had a blue incontinence pad placed at the bottom of the damaged door to stop cold outside air from entering the home. The use of this pad creates a tripping hazard in the event of an emergency evacuation.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Includes 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.

The blue incontinence pad has been removed. A piece of plywood has been attached to the door as a temporary measure. The exterior doors will be replaced in June. It was made known to staff during a staff meeting that all egresses must remain clear.

To prevent this in the future, we do spot checks once a month during fire drills for any obstructions.

Repeat Violation: Yes _____ Date(s) of Previous Violation(s): 02/25/2016

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Terushia Jackson, Administrator Date 3/15/17

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Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa.Code §2600

2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

2a. DESCRIPTION OF VIOLATION

A bottle of Nystatin Powder and a 30 mg tube of Nystatin Cream for the use of Resident 1 was located on the night stand in the room of Resident 1. The medications were not stored in a locked container.

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.

The Nystatin Powder and 30mg tube of Nystatin cream for Resident 1 was placed in the medication cart. This cart is locked.

To prevent this from happening again all creams and powders that are administered throughout the day will be kept in the locked staff room, in their original containers with the pharmacy label on them.

* Staff responsible for medication administration shall be re-educated on the proper storage of medications. To be completed by 4/10/17. BAS 3/27/17

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

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Jerushia Jackson Date 2/25/17

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Violation Report: 32407 - 02/08/2017 - Showers, Michael
PCH Name: REBECCA S AT EVERETT

1. REGULATION 55 Pa. Code §2600

2600.202 - The following procedures are prohibited:

- (1) Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited.
- (2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.
- (3) Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited.
- (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited.
- (5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited.
- (6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited.

2a. DESCRIPTION OF VIOLATION

Resident 2 recently completed a course of treatment for MRSA on 1/25/2017. The staff daily communication sheet dated 1/23/2017 has a notation stating "[Resident 2] is back from the hospital; [Resident 2] has MRSA; Keep [Resident 2] in [Resident 2] room per [the administrator]." During subsequent interviews, the resident stated that he/she was currently not allowed to leave the bedroom.

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.

The resident 2 has since been moved to skilled care due to unrelated health issues.

In the future if a resident has a communicable disease we will get a physician's order if we are to keep them away from other residents. We will have the physician specify if the patient is allowed to be in contact with the rest of the population and the steps we should take to prevent the spread of the disease.

If this situation occurs, the home will educate the resident about the possibility of spreading diseases to the other residents at the home to seek the resident's cooperation. BAS 3/27/17

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Terushia Jackson Administrator Date 2/25/17

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