



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]

MAILING DATE: August 21, 2018

Mr. Steven J. Miga  
Owner/President  
Eastern Comfort III Inc.  
4136 Nazareth Pike  
Bethlehem, Pennsylvania 18020

RE: Eastern Comfort III  
206 Diamond Street  
Slatington, Pennsylvania 18018  
License #216770

Dear Mr. Miga:

As a result of the Department's Bureau of Human Services Licensing inspection on June 15, 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,

Bob Bisignani  
Human Services Licensing Director

Enclosure  
Licensing Inspection Summary



Violation Report: 21677 - 06/15/2017 - Hummel, Jesse  
 PCH Name: EASTERN COMFORT III

**1. REGULATION 55 Pa.Code §2600**

2600.56 - The administrator shall be present in the home an average of 20 hours or more per week, in each calendar month.

**2a. DESCRIPTION OF VIOLATION**

It was determined through staff interviews that the facility does not have a qualified Administrator in the building on average of 20 Hours per week. since June 1, 2017.

**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.*

[Redacted] Administratrn retired due to medical issues. [Redacted] has been available Thru phone for guidance. Tiffany Giamei was hired and scheduled for classes for Administrata. I started may 8, 2017 at NACC Bethlehem Pa. I have classes scheduled at Temple University and hope to have my Administrata's Certificate by the end of August 2017.

[Redacted] will be available for assisting me with questions / concerns that I might have during the classes that I'm attending. When classes are completed I will be Eastern Comforts Administratrn.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Tiffany Giamei</i>	Date <i>6-27-17</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>7/21/17</u> (Date)	Plan of correction implementation status as of <u>7/21/17</u> (Date)
The above plan of correction was approved by <u>B.S.</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented