



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 24 2018

Ms. Elizabeth Koster
Chief Executive Officer
Fitzmaurice Community Services Inc.
2115 North Fifth Street
Stroudsburg, Pennsylvania 18360

RE: Fitzmaurice Community Services, Inc.
5 Elm Street
Stroudsburg, Pennsylvania 18360
License #: 209540

Dear Ms. Koster:

As a result of the Department of Human Services' (Department) annual licensing inspection on March 20, 2018 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.

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.

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
License Inspection Summary

Violation Report: 20954 - 03/20/2018 - O'Haire, Anne
 PCH Name: FITZMAURICE COMMUNITY SERVICES - INC

1. REGULATION 55 Pa.Code §2600

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

Resident privacy codes were found posted in a public, conspicuous area with regulatory violation reports that resulted from onsite inspections conducted on 03-22-17 and 06-22-17.

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.

1. The last page of the violation reports containing the key to the resident privacy codes were removed immediately upon finding.
2. To maintain confidentiality, the key will not be posted along with the violation reports in the future.
3. The Administrator will assure ongoing compliance.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Elizabeth Koster

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

Elizabeth Koster, CEO

Date

4/5/18

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

The above plan of correction is approved as of

5.1.18
 (Date)

Plan of correction implementation status as of

5.1.18
 (Date)

The above plan of correction was approved by

m
 (Initials)

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

Violation Report: 20954 - 03/20/2018 - O'Haire, Anne
 PCH Name: FITZMAURICE COMMUNITY SERVICES, INC

1. REGULATION 55 Pa.Code §2600
 2600.42(m) - A resident has the right to leave and return to the home at times consistent with the home rules and the resident's support plan.

2a. DESCRIPTION OF VIOLATION
 Located in resident's records was a letter from the home stating that visits away from the residence will be limited, this includes overnights, new perspective stays, hospitalizations, vacations, etc. The letter was not dated and stated that it was an effort to improve the residents' life skills. Residents are being deprived of his/her rights and cannot be restricted from spending time away from the facility.

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.

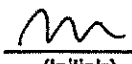
1. The letter, which was old from 2013 and not pertaining to the Personal Care Home, was inadvertently included with annual paperwork filled out by the Administrator with the resident.
2. The letter has been removed from the resident's file.
3. The residents have all been made aware that they continue to have, as they always have in the past, the right to leave and return to the home in accordance with the home rules and their support plans.
4. This letter is no longer being used by the Agency and will not be included with annual paperwork in the future.
5. The Administrator will assure ongoing compliance.

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) Elizabeth Koster, CEO	Date 4/5/18
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>5.1.18</u> (Date)	Plan of correction implementation status as of <u>5.1.18</u> (Date)
The above plan of correction was approved by  (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