



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**MAY 16 2018**

Mr. Peter Pachuski  
Secretary  
Emmanuel Home  
800 Priestly Avenue  
Northumberland, Pennsylvania 17857

RE: Emmanuel Home  
License # 200530

Dear Mr. Pachuski:

As a result of the Department of Human Services' (Department) annual licensing inspection on March 22, 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](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, appearing to read "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: EMMANUEL HOME		License Number: 20053
Address: 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857		County: Northumberland
Administrator: ROBERT DELBO		Region: NORTHEAST
Legal Entity Name: EMMANUEL HOME		
Legal Entity Address: 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857		
Certificate(s) of Occupancy		
I-2 11/10/2010 NORTHUMBERLAND L&I	C-2 LP 03/25/1999 LABOR & INDUSTRY	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 30	Waking Staff: 23
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Complaint		
On-Site Inspections Dates and Department Representatives On-Site 03/22/2018: Dumas, Gerald; Deluca, Amy		
Off-Site Inspection Dates and Inspectors, If Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 38	Number of Residents who:	
Number of Residents Served: 28	Receive Supplemental Security Income: 1	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 28	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 2	
Number of Current Hospice Residents: 1	Have a Physical Disability: 2	
Number of Hospice Residents in past year: 1		

*Robert Delbo* 4-4-18

Violation Report: 20053 - 03/22/2018 - Dumas, Gerald  
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa.Code §2600  
 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION  
 Two clear plastic bags of frozen chicken cutlets were found in the home's freezer, unlabeled and not dated.

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 attachment"

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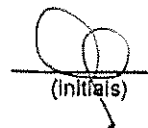
Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 4-16-18  
 (Date)

Plan of correction implementation status as of 4-16-18  
 (Date)

The above plan of correction was approved by   
 (Initials)

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

*Robert J. Clark* 4-4-18

Emmanuel Home  
800 Priestley Avenue  
Northumberland Pa. 17857

R. J. Delbo 4-4-18

Page 3

April 4, 2018

Plan of correction, Pa. Department of Human Services Inspection on February 22, 2017

Violation Report: 20053

Regulation 55 Pa.Code – 2600 – 103(e)

1. **Why is the regulation important?** To ensure PCH comply with State regulations pertaining to the safe storage of food, labeling and dating all stored food.
2. **How was the regulation violated?** Regulation was violated by taking food from the original box that was dated and labeled placing the clear bags of food in a storage bin and not placing labels on the two clear bags of chicken, indicating the date and name of the food item.
3. **What caused the violation?** The cause was removing two bags of chicken from the original box and storing them in a bin not placing a label with the date and name on the food items.
4. **What can be done right away to fix the violation?** Violation was corrected by placing labels and dates on the two bags of chicken.
5. **What can we do to prevent future violation?** Making sure all bags of food taken from original boxes are labeled with the date and description of the food item.
6. **Who will be responsible for preventing future violation?** Administrator, Robert J. Delbo

Signature of Legal Entity Representative R. J. Delbo

Printed Name and Title of Legal Entity Representative Robert J. Delbo, Administrator

Date 4-4-18

AS 4-16-18 R. J. Delbo 4-4-18

Violation Report: 20053 - 03/22/2018 - Dumas, Gerald  
 PCH Name: EMMANUEL HOME

1. REGULATION 55 Pa. Code §2600  
 2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION  
 On 3/6/18 resident # 1 was administered Ondansetron ( Zofran) take 1 tablet by mouth every 8 hrs, as needed. The time was not recorded on resident # 1's Medication Administration Record ( M.A.R.). Additionally the M.A.R. was also incorrectly initiated on 3/5/18 instead of the correct date of 3/6/18.

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 attachment "

Signature & date on p 3A of 3

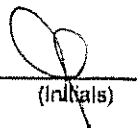
Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page)

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

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- Partially Implemented - Inadequate Progress
- Not Implemented

Robert J. Webb 4-4-18

Emmanuel Home  
800 Priestley Avenue  
Northumberland Pa. 17857

P3A93

April 4, 2018

Plan of correction, Pa. Department of Human Services Inspection on February 22, 2017

Violation Report: 20053

Regulation 55 Pa.Code – 2600 – 187(b) -187(a),(13),(14)

1. **Why is the regulation important?** To ensure PCH comply with State regulations pertaining to recording the correct time and the correct date a medication is administered.
2. **How was the regulation violated?** Regulation was violated by not recording the time resident #1 was administered medication on the PRN M.A.R. and additionally the M.A.R was incorrectly initialed on 3/5/18 instead of the correct date of 3/6/18.
3. **What caused the violation?** The cause was not recording the time the medication was given and not recording the correct date.
4. **What can be done right away to fix the violation?** Violation was corrected by having the person who gave the medication put the time she gave the medication and the correct date. Also follow-up consisted of reviewing the 5 Rights of Medication Administration and reinforcing education to document medication administration accurately with the med-tech, especially PRN medication administration.
5. **What can we do to prevent future violation?** Make sure the time and date is recorded for all medications after each medication is given and then reviewed by another staff person at the end of each shift making sure all medications are documented and given at the right time and date.
6. **Who will be responsible for preventing future violation?** Kimberly A. Delbo, RN, Resident Care Manager.

Signature of Legal Entity Representative Kimberly A. Delbo RN, MSW

Printed Name and Title of Legal Entity Representative Kimberly A. Delbo, RN, MSW  
Resident Care Manager

Date 4-4-18

Cedf.  
4-16-18  
Robert J. Webb 4-4-18