



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 13 2018

Ms. Marcia Houston
Administrator
Roger & Marcia Houston
93 Dayspring Lane
Morrisdale, Pennsylvania 16858

RE: Dayspring Personal Care Home
Certificate #: 448650

Dear Ms. Houston:

As a result of the Department's Bureau of Human Services Licensing annual 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.

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: DAYSPRING PERSONAL CARE HOME		License Number: 44885
Address: 93 DAYSPRING LANE, MORRISDALE, PA 16858		County: Clearfield
Administrator: Marcia Houston		Region: WEST
Legal Entity Name: ROPER & MARCIA HOUSTON		
Legal Entity Address: 93 DAYSPRING LANE, MORRISDALE, PA 16858		
Certificate(s) of Occupancy C-2 LP 05/24/2004 L&I		<p>RECEIVED</p> <p>MAY 25 2018</p> <p>WEST REGION FIELD OFFICE Human Services Licensing</p>
Staffing Hours		
Resident Support: 0	Total Daily Staff: 9	Waking Staff: 7
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 03/22/2018: Winters, Lynn; Park, Beth		
Off-Site Inspection Dates and Inspectors, if Applicable		
<p>RECEIVED</p> <p>JUL 12 2018</p> <p>Human Services Licensing</p>		
Other Details		
Partial or Full Triggers:	Random Indicators:	
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 13 Number of Residents Served: 9 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, If applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents In past year: 2	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 9 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

MAY 25 2018

Violation Report: 44885 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

The contract for resident #1, dated 10/25/16, was not signed by the administrator/designee or the resident.

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.

please see attached

See page 2A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, LPN/Administrator

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

Lita Houston, LPN/Administrator

Date *5/25/2018*

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

The above plan of correction is approved as of

7/2/18
(Date)

Plan of correction implementation status as of

7/2/18
(Date)

The above plan of correction was approved by

MS
(Initials)

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

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May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.25 (b)

██████████ contract signed day of inspection when omission discovered.

Administrators, Lita Houston and Marcia Houston reviewed omission day of inspection. Lita Houston, LPN/Administrator discussed omission with resident and her daughter. Contract reviewed and proper signatures obtained. Copy of contract signature page attached.

All resident contracts reviewed by Lita Houston, LPN/Administrator day of inspection; all others found compliant.

New 2018 contracts to be reviewed by second administrator (Marcia or Lita) for signature compliance on all applicable components of contract, on day of signing; reviewer to initial each page of review.

Lita Houston

Marcia Houston

Administrator's Signature

5/25/2018

Date

MA 7/2/18

MAY 25 2018

Violation Report: 44865 - 03/22/2018 - Winters, Lynn
 PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.42(s) - 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

The lock on the pocket door of the first floor common bathroom does not latch.

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.

please see attached

See page 3A of 9

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Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
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Lita Houston, LPH/Administrator

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

Lita Houston, LPH/Administrator

Date *5/25/2018*

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PAGE 2/2018

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May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.42 (s)

Maintenance requested to examine lock for repair or replacement on day of inspection.

Lock was restored operational and secure with a new strike plate (by [REDACTED] General Contractor).

Routine adjustment to latch and hook mechanism was made. Additionally, door rollers were balanced and lubricated for ease of operation.

DCS will check bi-annually that the door, latch and lock remain in good operational order and record.

DCS/administrator instructed residents sharing bathroom to tell DCS of any difficulty using door or locking door.

DCS to notify administrator and/or maintenance for adjustment or repair as needed.

Administrator checked all other privacy locks in facility for compliance; all found in good working order.

Lita Houston

Maria Houston

Administrators' Signature

5/25/2018

Date

MA 5/2/18

Violation Report: 44885 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE

Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.64(c) - An administrator shall have at least 24 hours of annual training relating to the job duties.

2a. DESCRIPTION OF VIOLATION

The administrator's training year is from January 1st to December 31st. During the 2017 training year, staff person A had 16.25 hours of Department-approved trainings.

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.

please see attached

Staff person A completed the following training:

- 5/24/18 - 6 hours - Concepts in dementia care*
- 6/14/18 - 7 hours - Alzheimer's Disease and Dementia Care*
- 6/15/18 - 4 hours - dementia*
- 6/13/18 - 2 hours - The Art of Assertive Leadership MS 7/2/18*

See page 4A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, Sr./Administrator

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

Lita Houston, LAN/Administrator

Date *5/25/2018*

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7/2/18
(Date)

Plan of correction implementation status as of

7/2/18
(Date)

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(Initials)

MAY 25 2018

May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.64 (c)

Eight additional hours added to the required 24 hours of 2018 training to compensate for hours not received in 2017. Total training requirement for Marcia Houston, Administrator for 2018 will be 32 hours.

Immediate effort began to secure training hours in required topics for administrators according to 2600.64 (c); to be fully compliant by December 31, 2018.

Administrators, Marcia Houston and Lita Houston contacting providers for training and registering for seminars and classes for required CEU's. Administrators (Marcia and Lita) are utilizing and referencing the DHS website list, inspector recommendations (e.g. list-serve), previous instructors, and plan to contact Michele Strauser for assistance as needed and approval of training available in our area.

Administrators (Marcia and Lita) will annually review availability of training applicable to administrators only, note changes/updates to requirements, seek assistance from Michele Strauser as needed, and comply within annual training period.

Administrators (Marcia and Lita) will maintain staff training records clear and consistent with 2600 requirements using Collins Learning record tracking, standardized forms on DHS website for in-person training sessions, and certificates of CEU's earned in person.

Lita Houston

Marcia Houston

Administrators' Signatures

5/25/2018

Date

YMA 7/2/18

MAY 25 2018

Violation Report: 44865 - 03/22/2018 - Winters, Lynn
 PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE
 Human Services Licensing

1. REGULATION 55 Pa.Code §2500

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

The staff training year is from January 1st to December 31st. Staff person B, hired on 11/20/10, and staff person C, hired on 8/28/14, did not have training in the following required topics during the 2017 annual training year:

- Medication self-administration
- Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan
- Safe management techniques.

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.

please see attached

Staff person B received medication self-administration training on 5/3/18 and staff person C received this training on 4/13/18. MS 7/2/18

Staff persons B and C received training on instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan on 5/10/18. MS 7/2/18

Staff person B received training in safe management techniques on 4/15/18, 6/3/18 and 6/22/18. Staff person C received this training on 4/11/18, 4/14/18 and 4/15/18. MS 7/2/18

The 2018 staff training plan was revised. MS 7/2/18

See page 5A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Lita Houston, LPN / Administrator

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

Lita Houston, LPN / Administrator

Date *5/25/2018*

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 (Date)

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 (Date)

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 (Initials)

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

MAY 25 2018

May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.65 (f) and 2600.65 (g)

Training records reviewed by facility administrators and DCS; although training was recalled, documentation of training was unfortunately missed.

Administrators reviewed required training for DCS according to 2600.65(f).

Lita Houston, LPN/Administrator secured staff training services through Collins Learning in February 2018 and was processing 2018 approved online assignments at time of inspection. Remaining required in-person training topics for 2018 were scheduled the following week.

Administrator introduced and instructed each DCS member in use of Collins Learning staff training format and assignments.

List of required DCS annual training reviewed with inspectors on day of inspection. Referencing DHS website, together we aligned all allowable online topics of DCS training with approved list of Collins Learning topics to establish staff assignments.

OAPSA and Resident Rights in-service trainings for 2018, instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan have been completed by all staff members since inspection. Remaining 2017 training topics in violation: medication self-administration; safe management techniques; emergency preparedness procedures and recognition and response to crises and emergency situations are being arranged.

Lita Houston, LPN/Administrator will monitor annual requirements for updates and changes of DCS training requirements, monitor staff progress toward compliance, and provide complete documentation, by year-end training period of staff training records, clear and consistent with 2600 requirements.

Lita Houston

Maurice [Signature]

Administrators' Signatures

5/25/2018

Date

MA 7/2/18

MAY 25 2018

Violation Report: 44865 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE

Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10226.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

The staff training year is from January 1st to December 31st. Staff person B, hired on 11/20/10, and staff person C, hired on 8/28/14, did not have training in the following required topics during the 2017 annual training year:

- Emergency preparedness procedures and recognition and response to crises and emergency situations
- Resident rights
- The Older Adult Protective Services Act (35 P.S. 10225.101 – 10225.5102).

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.

please see attached

Staff persons B and C received resident rights and OAPSA training on 5/10/18. ms 7/2/18

Staff person B completed emergency preparedness training on 6/22/18 and staff person C completed this training on 4/15/18. ms 7/2/18

the 2018 staff training plan was revised. ms 7/2/18

See page 6A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, LPA / Administrator

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

Lita Houston, LPA / Administrator

Date *5/25/2018*

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(Date)

Plan of correction implementation status as of 7/2/18
(Date)

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(Initials)

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

MAY 25 2018

May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.65 (f) and 2600.65 (g)

Training records reviewed by facility administrators and DCS; although training was recalled, documentation of training was unfortunately missed.

Administrators reviewed required training for DCS according to 2600.65(f).

Lita Houston, LPN/Administrator secured staff training services through Collins Learning in February 2018 and was processing 2018 approved online assignments at time of inspection. Remaining required in-person training topics for 2018 were scheduled the following week.

Administrator introduced and instructed each DCS member in use of Collins Learning staff training format and assignments.

List of required DCS annual training reviewed with inspectors on day of inspection. Referencing DHS website, together we aligned all allowable online topics of DCS training with approved list of Collins Learning topics to establish staff assignments.

OAPSA and Resident Rights in-service trainings for 2018, instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan have been completed by all staff members since inspection. Remaining 2017 training topics in violation: medication self-administration; safe management techniques; emergency preparedness procedures and recognition and response to crises and emergency situations are being arranged.

Lita Houston, LPN/Administrator will monitor annual requirements for updates and changes of DCS training requirements, monitor staff progress toward compliance, and provide complete documentation, by year-end training period of staff training records, clear and consistent with 2600 requirements.

Lita Houston

Marcia Hunt

Administrators' Signatures

5/25/2018

Date

MD 7/2/18

MAY 25 2018

Violation Report: 44865 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION

Resident #2's glucometer was not set to the current date.

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.

please see attached

Blood glucose monitoring and glucometer calibration Training was completed on 3/23/18. MS 7/2/18

See page 7A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, GM/ Administrator

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

Lita Houston, GM/ Administrator

Date *5/25/2018*

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(Date)

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MAY 25 2018

May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.185 (a)

[REDACTED] glucometer examined by inspector. Inspector showed DCS and administrator the incorrect date/time on device. Inspector demonstrated how to correct this setting. The glucometer history was also reviewed and Inspector cautioned DCS to take care to interpret display correctly regarding trend and to-date data.

DCS and administrator re-familiarized ourselves with specific glucometer settings as devices can be a little different depending on manufacture/brand. DCS instructed in careful interpretation of data displayed.

Immediately following inspection, all other glucometers used in facility were examined by DCS/Administrator and displays and data found to be compliant.

DCS to follow device instructions for each glucometer, continue use of BSG flow sheets, but include periodic documentation (by initials) of recommended control testing for proper range operation, and correct day/time on device display.

Lita Houston

Marcia Houston

Administrator's Signatures

5/25/2018

Date

MA 7/2/18

Violation Report: 44865 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

MAY 25 2018

1. REGULATION 55 Pa.Code §2600

2600.187(d) - The home shall follow the directions of the prescriber.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

Resident #2 is prescribed Losartan POT tab 50 mg - Take 1 tablet by mouth once daily *HOLD IF SBP < 90 AND DBP < 60. However, the home has not been taking the resident's blood pressure.

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.

please see attached

Resident #2's blood pressure parameter was discontinued, ms 7/2/18

Blood pressure parameter training was done on 3/23/18, ms 7/2/18

See page 8A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, Gen/ Administrator

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

Lita Houston, LPN/Administrator

Date *5/25/2018*

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PAGE 8A 057

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WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.187 (d)

Violation of order reviewed by Lita Houston, LPN/Administrator and DCS present day of inspection.

BP parameters high-lighted on medication record, DCS instructed to obtain BP prior to administration of medication and where and how to record results on the medication record.

DCS instructed to high-light new orders requiring parameters on medication record, and to give explanation to resident for checking BP.

Immediately following inspection, Lita Houston surveyed all medication records for parameters and found them all in compliance.

Medication records are reviewed monthly by [REDACTED] DCS provider, for accuracy with physician's orders. Parameters will be high-lighted and noted to DCS peers for continuity. Lita Houston, LPN/Administrator will provide a second review of new orders with parameters for compliance and initial applicable medication page reviewed.

Lita Houston

Maria Smith

Administrators' Signature

5/25/2018

Date

md 7/2/18

MAY 25 2018

Violation Report: 44865 - 03/22/2018 - Winters, Lynn

PCH Name: DAYSPRING PERSONAL CARE HOME

WEST REGIONAL FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

Resident #3's preadmission screening form, dated 5/9/17, was incomplete. The entire 2nd page of the form was blank.

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.

please see attached

see page 9A of 9

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lita Houston, SpA/Administrator

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

Lita Houston, LPA/Administrator

Date *5/25/2018*

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(Date)

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. MS
(Initials)

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MAY 25 2018

May 21, 2018

WEST REGION FIELD OFFICE
Human Services Licensing

VIOLATION 2600.224 (a)

██████████ preadmission screening form reviewed by administrator, DCS member, and Leah ██████████

Information on second page of form recalled, but not documented.

Documentation completed by Lita Houston, LPN/Administrator on day of inspection.

All other resident screenings reviewed and found compliant.

New resident documentation reviewed as part of DCS/Administrator annual trainings. When new resident admitted, a second DCS member as designated by administrator, or second administrator to review preadmission screening, assessment tools, DME and RASP for completion and required signatures. Reviewer to Initial each page reviewed.

Lita Houston

Maria Hout

5/25/2018

Administrators' Signatures

Date

md 7/2/18