



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: October 9, 2018

Mr. Dan March
Senior Director
Presbyterian Senior Care, Inc.
880 South Main Street
Washington, Pennsylvania 15301

RE: Southminster Place
Certificate #: 415930

Dear Mr. March:

As a result of the Department's Bureau of Human Services Licensing inspection on April 12, 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.

Sincerely,

A handwritten signature in black ink, appearing to read "Suzy Quinn".

Suzy Quinn
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: SOUTHMINSTER PLACE		License Number: 41593
Address: 880 SOUTH MAIN STREET, WASHINGTON, PA 15301		County: Washington
Administrator: Glenn Delich		Region: WEST
Legal Entity Name: PRESBYTERIAN SENIOR CARE INC		
Legal Entity Address: 880 SOUTH MAIN STREET, WASHINGTON, PA 15301		RECEIVED
Certificate(s) of Occupancy I-2 04/11/2002 Township of South Strabane		SEP 25 2018 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 94	Working Staff: 71
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 04/12/2018: Winters, Lynn		
Off-Site Inspection Dates and Inspectors, if Applicable 04/13/2018: Winters, Lynn 04/16/2018: Winters, Lynn		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 90 Number of Residents Served: 71 Secured Dementia Care Unit In Home: Yes Area: Woodside Secured Dementia Unit Capacity, if Applicable: 20 Number of Residents Served in Secured Dementia Care Unit, if applicable: 18 Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 12		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 71 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 23 Have a Physical Disability: 0

Violation Report: 41593 - 04/12/2018 - Winters, Lynn
PCH Name: SOUTHMINSTER PLACE

1. REGULATION 55 Pa.Code §2800

2600.234(a) - Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.

2a. DESCRIPTION OF VIOLATION

Resident #1 was admitted to the secured dementia care unit on 3/22/18; however, the resident's support plan was not completed until 3/28/18.

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.

GLENN DELICH, ADMINISTRATOR, WILL REVIEW THE "PERSONAL CARE-RESIDENT ASSESSMENT AND SERVICE PLAN POLICY" WITH LICENSED NURSING TEAM RESPONSIBLE FOR COMPLETION ON SEPTEMBER 24, 2018.
MONTHLY AUDITS WILL BE COMPLETED ON ALL NEW ADMISSION RASPs TO CONFIRM/IDENTIFY TIMELY COMPLETION. SUPPORTING DOCUMENTATION SUBMITTED INCLUDES: RESIDENT ASSESSMENT AND SERVICE PLAN POLICY. SIGN IN RECORD FOR STAFF TRAINING WILL BE FORWARDED AS WELL.

Training was completed on 9/27/18, 9/28/18 and 10/2/18. MS 10/4/18

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SEP 25 2018

WEST REGION FIELD OFFICE
Human Services Licensing

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

Signature of Legal Entity Representative (Required on EVERY Page) *Glenn Delich* 7242335756

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) GLENN DELICH, EXECUTIVE DIRECTOR Date 9-25-18

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

The above plan of correction is approved as of 10/4/18 (Date)

Plan of correction implementation status as of 10/4/18 (Date)

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

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

Violation Report: 41693 - 04/12/2018 - Winters, Lynn
PCH Name: SOUTHMINSTER PLACE

1. REGULATION 55 Pa.Code §2600
2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION
Correction fluid was used in the "form date" section of resident #2's current assessment and support plan. The date, 6/20/17, was written over the correction fluid.

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.

GLENN DELICH, ADMINISTRATOR, WILL COMPLETE/ACQUIRE TRAINING TO NURSING DEPARTMENT PERTAINING TO DHS-CHAPTER 1600.251 RESIDENT RECORDS (B) "ENTRIES MUST BE PERMANENT, LEGIBLE, DATED, SIGNED BY PERSON MAKING ENTRY" SUPPORTING DOCUMENTATION WILL INCLUDE STAFF SIGN-IN RECORDS FOR TRAINING SESSIONS ON SEPTEMBER 27TH & 28TH. MONTHLY RECORD AUDITS OF ALL NEW ADMISSIONS WILL BE COMPLETED CONFIRMING ALL ENTRIES ARE PERMANENT. Training was also completed on 10/31/18. ms 10/4/18

RECEIVED

SEP 25 2018

WEST REGION FIELD OFFICE
Human Services Licensing

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]* 724 223 5756

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *GLENN DELICH, EXECUTIVE DIRECTOR* Date *9-25-18*

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