



Mailing Date: August 6, 2018

Ms. Deneane R. Miller,
Owner/Administrator
Deneane Armel
142 Fairview Avenue
Confluence, Pennsylvania 15424

RE: Deneane's Personal Care Home
License #: 321520

Dear Ms. Miller:

As a result of the Department's Bureau of Human Services Licensing inspection on May 31, 2018 and June 26, 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 that reads "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 32152 - 05/31/2018 - Springs, Israel
 PCH Name: DENEANE S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The vinyl flooring in the kitchen is worn and in poor condition with large areas missing that have been covered with cardboard and tape.

An approximately two foot by four foot area of the floor adjacent to the shower in the first floor bathroom has water damage and sinks when stood upon. There is no longer caulking between the shower and the floor.

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.

The vinyl flooring in the kitchen will be replaced on or before 9/30/2018.

The flooring in the bathroom will be repaired on or before 9/30/2018. Vinyl flooring will be replaced & contract will ensure caulking is intact.

Administrator will check the home weekly to ensure all areas are in good repair and free of hazards.

* The home will send the Department documentation to verify that the repairs have been completed. BAS 8/1/18

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Deneane S. Miller*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Deneane S. Miller* Date *7/23/18*

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

The above plan of correction is approved as of 8/1/18
 (Date)

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

Plan of correction implementation status as of 8/6/18
 (Date)

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

Violation Report: 32152 - 05/31/2018 - Springs, Israel

PCH Name: DENEANE S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.142(a) - The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.

2a. DESCRIPTION OF VIOLATION

On 5/26/2018, Resident #1 requested that staff contact an ambulance to provide transportation for the resident to the hospital due to ongoing problems with severe edema in the resident's leg. Staff Member A refused to provide the resident with this assistance. Thus the resident was required to make the call for the ambulance for him/herself in order to receive the necessary care and treatment for the condition.

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.

Staff was educated on Regulation 2600.142(a) Administrator will continue to remind staff of this Regulation. Administrator also educated the residents to ensure they report to other staff/Administrator if they feel they need medical care and did not receive help.

The administrator will hold individual private meetings with at least 25% of the residents of the home on a monthly basis. The selection of residents shall change each month to ensure that each resident has the opportunity to have a private discussion with the administrator on a quarterly basis. These meetings shall be utilized to review staff performance and identify areas of concern requiring administrator attention.

BAS 8/1/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Deneane S. Miller

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

Deneane S. Miller

Date 7/23/18

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