



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 10 2018

Ms. Maureen Carey
President Board of Managers
Williamsport Home, Inc.
1900 Ravine Road
Williamsport, Pennsylvania 17701

RE: The Williamsport Home & Apartments, 3rd Floor
License #200630

Dear Ms. Carey:

As a result of the Department's Bureau of Human Services Licensing annual inspection on June 5, 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: 20063 - 06/05/2018 - Deluca, Amy
 PCH Name: THE WILLIAMSPORT HOME & APARTMENTS 3RD FLOOR

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. §§ 10225.101-10225.5102).
- (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

Staff person A did not have annual training in the Older Adult Protective Services Act in 2017.

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.

Preparation and evaluation of the enclosed plan of correction set forth in these documents does not constitute admission or agreement by the provider of the truth of the facts alleged or concluded set forth in the statement of deficiencies. The plan of correction is prepared and or executed solely because it is required by the provision of Federal and State law.

2600.65g

1. This regulation is important to ensure that all staff who works in the home are reminded of the home's emergency procedures and mandated reporting requirements.
2. This regulation was violated due to the staff person A was trained under the Elder Justice Act instead of the Older Adult Protective Services Act.
3. Moving forward, education content will be adjusted so that Personal Care Staff will be educated on the Older Adult Protective Services Act.
4. The Administrator will report if meeting regulatory compliance at the quarterly Quality Assurance Committee Meeting.
5. The Administrator shall monitor and assure ongoing compliance by reviewing the content of the inservice material that is presented by the Staff Education Coordinator or designee upon hire and annually to assure that the education addresses the Older Adult Protective Services Act.
6. In the event non-compliance is noted the staff person will be re-educated and Administrator will monitor for compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Wonne Leubach LPW PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Wonne Leubach LPW PCHA* Date *6-18-18*

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

The above plan of correction is approved as of <u>6/18/18</u> (Date)	Plan of correction implementation status as of <u>6/18/18</u> (Date)
The above plan of correction was approved by <u><i>W</i></u> (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

Violation Report: 20063 - 06/05/2018 - Deluca, Amy
PCH Name: THE WILLIAMSPORT HOME & APARTMENTS 3RD FLOOR

1. REGULATION 55 Pa.Code §2500
2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION
The home's most recent supervised fire drill and fire safety inspection conducted by a fire safety expert occurred on 5/8/2017. The home is not compliant with this regulation.

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.

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2600.132b

1. This regulation is important to identifying and correcting unsafe conditions helps prevent fires from occurring.
2. This regulation was violated due to the home not having its annual fire drill supervised by a fire safety expert or a fire safety inspection.
3. Both the fire company crew and the fire safety inspector performed our annual drill on June 8, 2018. Moving forwards the administrator will notify both the fire company and the fire safe inspector for the need of our annual drill three months in advance.
4. The Administrator will audit annually.
5. The Administrator will report if meeting regulatory compliance at the quarterly Quality Assurance Committee Meeting.
6. The Administrator will monitor for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Yvonne Laubach LPN RCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Yvonne Laubach LPN RCHA* Date *6-15-18*

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The above plan of correction was approved by <u><i>M</i></u> (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

Violation Report: 20063 - 06/05/2018 - Deluca, Amy
 PCH Name: THE WILLIAMSPORT HOME & APARTMENTS 3RD FLOOR

1. REGULATION 55 Pa.Code §2600
 2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION
 The home's fire drill logs document an evacuation time of 6 minutes on the following dates: 11/14/17, 09/16/17, 7/10/17, 6/24/17, and 02/28/17. The documented evacuation time for the drill conducted 12/13/16 is 6 minutes 0 seconds. The home is not always documenting the evacuation time in both minutes and seconds; additionally, it was determined that the home is likely not documenting the evacuation time accurately given that 6 of the last 12 evacuation times are 6 minutes exactly. The home's maximum evacuation time according to the fire safety expert letter dated 5/8/2017 is 6 minutes.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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2600.132c

1. This regulation is important because recording fire drill information helps the home to ensure compliance with the regulations relating to fire drills, and to identify and correct problems with evacuations.
2. This regulation received a violation because not all drills had minutes and seconds recorded.
3. Moving forward, fire drill records shall accurately reflect date, time, and the amount of time it took for evacuation, including minutes and seconds.
4. The Administrator will audit the fire drill records monthly for compliance.
5. The Administrator will report if meeting regulatory compliance at the quarterly Quality Assurance Committee Meeting.
6. The Administrator will monitor monthly for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Yvonne Laubach LPN PCHA* Date *6-15-18*

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Violation Report: 20063 - 06/05/2018 - Deluca, Amy
 PCH Name: THE WILLIAMSPORT HOME & APARTMENTS 3RD FLOOR.

1. REGULATION 55 Pa.Code §2600
 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION
 On 5/9/2018 the home conducted a fire drill with a documented evacuation time of 5 minutes and 37 seconds. The home does not have a current letter written by a fire safety expert allowing the home to extend the maximum evacuation time.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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2600.132d

1. This regulation is important because an evacuation within the maximum evacuation time prevents fire-related death and injury.
2. This regulation was violated due to the expiration of our fire safety letter which indicated 6 minutes to vacate.
3. Moving forwards the administrator will notify both the fire company and the fire safe inspector for the need of our annual drill three months prior to the expiration of current letter
4. The Administrator will audit annually for compliance.
5. The Administrator will report if meeting regulatory compliance at the quarterly Quality Assurance Committee Meeting.
6. The Administrator will monitor for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Yvonne Laubach LPW PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Yvonne Laubach LPW PCHA</i>	Date <i>6-15-18</i>
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