



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 31 2018

Ms. Kaitlyn Magro,
Administrator
St. Jude's Haven, Inc.
1072 Mt. Airy Drive
Johnstown, Pennsylvania 15904

RE: St. Jude's Haven Personal Home
Certificate #: 307870

Dear Ms. Magro:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on August 15, 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,

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 30787 - 08/15/2018 - McCloskey, Jason

PCH Name: ST JUDE S HAVEN PERSONAL HOME

1. REGULATION 55 Pa.Code §2600

2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

The Care Facility Carbon Monoxide Alarms Standards Act, in effect since September 2016, requires homes with fossil-fuel burning devices to have a carbon monoxide alarm installed in close proximity to, but not less than 15' from any fossil-fuel burning device or appliance. The home has a gas-burning stove, however, did not have a carbon monoxide alarm installed.

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 day of inspection I purchased + installed a Carbon monoxide detector. The alarm is tested once weekly per manufacturer's guideline. It is installed mid-height around the corner from the kitchen (about 4 feet). The battery is good for 10 years. It is not replaceable. In the event the alarm no longer functions properly, I will immediately purchase + install a new one.

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

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Kaitlyn Mago* Date *8/25/18*

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

The above plan of correction is approved as of <u>8/30/18</u> (Date)	Plan of correction implementation status as of <u>8/30/18</u> (Date)
The above plan of correction was approved by <u>BAS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 30787 - 08/15/2018 - McCloskey, Jason

PCH Name: ST JUDE S HAVEN PERSONAL HOME

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

The home's last three sleeping-hour fire drills were held on 3-31-18 at 11:15pm, 9-23-17 at 10:55pm, and 5-22-17 at 10:55pm. Each of these drills had four staff people participating in the drill. However, according to staff records, the average number of staff people on duty at these times is two. These drills were conducted at periods of extra staff and without sufficient variance in the times they were held.

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 to only document number of staff participating, not the number of staff on the building. Times will vary example: 1230AM for 1 drill and 530AM for the second required drill. The administrator will review the drills to ensure compliance.

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

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Kaitlyn Magro* Date *8/28/18*

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

The above plan of correction is approved as of <u>8/30/18</u> (Date)	Plan of correction implementation status as of <u>8/30/18</u> (Date)
The above plan of correction was approved by <u>BAS</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